

*Healthcare and Regulatory Subcommittee Meeting*

Tuesday, February 19, 2019

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# AGENDA

# South Carolina House of Representatives



## Legislative Oversight Committee

### ***HEALTHCARE AND REGULATORY SUBCOMMITTEE***

***Chairman John Taliaferro (Jay) West, IV***

***The Honorable Robert L. Ridgeway, III***

***The Honorable Bill Taylor***

***The Honorable Christopher Sloan (Chris) Wooten***

***Tuesday February 12, 2019***

***9:00 a.m.***

***Room 110 - Blatt Building***

*Pursuant to Committee Rule 6.8, S.C. ETV shall be allowed access for internet streaming whenever technologically feasible.*

### **AGENDA**

- I. Approval of Minutes**
- II. Discussion of study of the Department of Mental Health**
- III. Adjournment**

# MEETING MINUTES

*First Vice-Chair:  
Laurie Slade Funderburk*

*Micajah P. (Micah) Caskey, IV  
Neal A. Collins  
Patricia Moore (Pat) Henegan  
William M. (Bill) Hixon  
Jeffrey E. (Jeff) Johnson  
Marvin R. Pendarvis  
Tommy M. Stringer  
Bill Taylor  
Robert Q. Williams*

## **Legislative Oversight Committee**



**South Carolina House of Representatives**

*Jennifer L. Dobson  
Research Director*

*Cathy A. Greer  
Administration Coordinator*

*Gary E. Clary  
Chandra E. Dillard  
Lee Hewitt  
Joseph H. Jefferson, Jr.  
Mandy Powers Norrell  
Robert L. Ridgeway, III  
Edward R. Tallon, Sr.  
John Taliadro (Jay) West, IV  
Chris Wooten*

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*Charles L. Appleby, IV  
Legal Counsel*

*Carmen J. McCutcheon Simon  
Research Analyst/Auditor*

*Kendra H. Wilkerson  
Fiscal/Research Analyst*

**Healthcare and Regulatory Subcommittee Meeting  
Tuesday, February 5, 2019, at 9:00 am  
Blatt Building Room 321**

### **Archived Video Available**

- I. Pursuant to House Legislative Oversight Committee Rule 6.8, South Carolina ETV was allowed access for streaming the meeting. You may access an archived video of this meeting by visiting the South Carolina General Assembly's website (<http://www.scstatehouse.gov>) and clicking on *Committee Postings and Reports*, then under *House Standing Committees* click on *Legislative Oversight*. Then, click on *Video Archives* for a listing of archived videos for the Committee.

### **Attendance**

- I. The Healthcare and Regulatory Subcommittee is called to order by Chair Jay West on Tuesday, February 5, 2019 in Room 403 of the Blatt Building. All members of the Subcommittee are present for all or a portion of the meeting.

### **Minutes**

- I. House Rule 4.5 requires standing committees to prepare and make available to the public the minutes of committee meetings, but the minutes do not have to be verbatim accounts of meetings. It is the practice of the Legislative Oversight Committee to provide minutes for its subcommittee meetings.
- II. Representative Taylor moves to approve the meeting minutes from the August 30, 2018, meeting. The motion passes.

Representative Taylor's motion to approve the meeting minutes from the July 30, 2018, meeting.	Yea	Nay	Not Voting (Absent)	Not Voting (Present)
Rep. Robert Ridgeway				✓
Rep. Bill Taylor	✓			
Rep. Chris Wooten				✓
Rep. Jay West	✓			

## Meeting

- I. Chair West explains that this is the Subcommittee's first meeting with the Department of Mental Health, and that the purpose is to receive an overview of the agency.
- II. Chair West explains that all testimony given to this subcommittee, which is an investigating committee, must be under oath. He reminds those sworn in during prior meetings that they remain under oath. Chair West swears in the following people from DMH:
  - Mark W. Binkley, Esq., Interim State Director
  - Rochelle Caton, Esq., Director, Office of Client Advocacy/Legislative Liaison
  - Noelle Wriston, Director, Budget and Planning, Financial Services
  - Kimberly Rudd, M.D., Medical Director, Inpatient Services
  - Debbie Calcote, MA, Deputy Director, Administrative Services
  - Versie Bellamy, RN, MN, DNP, Deputy Director, Inpatient Services
  - Alan Powell, Esq., General Counsel
  - Deborah Blalock, M.Ed., LPCS, CPM, Deputy Director, Community Mental Health Services
  - Robert Bank, M.D., Medical Director
  - Stewart Cooner, Director of Special Programs and Telepsychiatry
- III. Interim Director Binkley provides an overview of the agency, including the agency's history. Deputy Director Bellamy provides an overview of Inpatient Services. Deputy Director Blaylock provides an overview of Community Mental Health Services. Medical Director Bank provides an overview of Medical Affairs. Deputy Director Calcote provides an overview of Administrative Services.
- IV. Subcommittee members ask, and agency staff respond to questions about the following subjects:
  - a. Veteran homelessness;
  - b. School mental health services;
  - c. Provider shortages; and
  - d. Admissions processes.
- V. There being no further business, the meeting is adjourned.

# STUDY TIMELINE

## Legislative Oversight Committee Actions

- May 3, 2018 - Prioritizes the agency for study
- May 9, 2018 - Provides the agency with notice about the oversight process
- July 17 – August 20, 2018 - Solicits input from the public about the agency in the form of an online survey
- January 14, 2019 - Holds **Meeting 1** to obtain public input about the agency

## Healthcare and Regulatory Subcommittee Actions

- February 5, 2019- Holds **Meeting 2** with the agency to receive an overview of the agency's **history, mission, organization, products, and services**
- February 19, 2019 – Holds **Meeting 3** with the agency to receive testimony about the **Inpatient Services Division**

## Department of Mental Health Actions

- March 11, 2015- Submits its **Annual Restructuring and Seven-Year Plan Report**
- January 8, 2016- Submits its **2016 Annual Restructuring Report**
- September 2016- Submits its **FY 2015-16 Accountability Report/Annual Restructuring Report**
- September 2017- Submits its **FY 2016-17 Accountability Report/Annual Restructuring Report**
- September 2018 – Submits its **FY 2017-18 Accountability Report/Annual Restructuring Report**
- November 19, 2018- Submits its **Program Evaluation Report**
- February- TBD 2019- Meets with and **responds to Subcommittee inquiries**

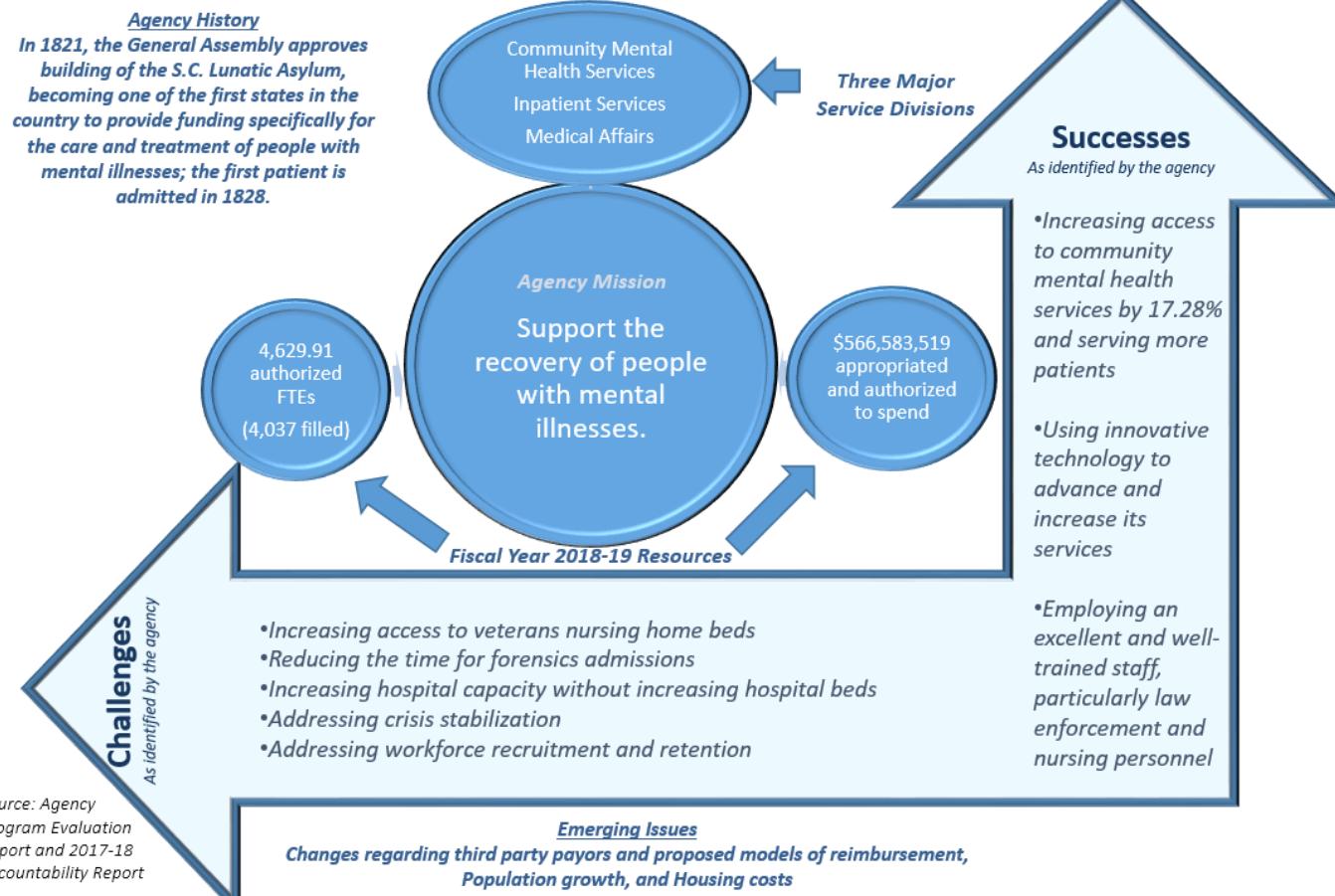
## Public's Actions

- July 17 – August 20, 2018 - Provides input about the agency via an **online public survey**
- January 14, 2019 – Provides testimony at public input meeting

# AGENCY OVERVIEW

## Snapshot

### Department of Mental Health



# AGENCY PRESENTATION

# The Division of Inpatient Services

## Presentation

Versie J. Bellamy, DNP, MN, RN  
Deputy Director



*“Abstract A,” by patient in SCDMH Art of Recovery Program*



## 2 Psychiatric Hospitals

G. Werber Bryan Psychiatric Hospital, Columbia, SC

Adult Services

Williams S. Hall Psychiatric Institute, Child & Adolescent Services

Forensic Services

Patrick B. Harris Psychiatric Hospital, Anderson, SC

1

## Alcohol and Drug Addiction Treatment Program/Hospital

Morris Village Alcohol and Drug Addiction Treatment Center, Columbia, SC

1

## Behavioral Treatment Program

Sexually Violent Predators Treatment Program, Columbia, SC

1

## General Nursing Home

C.M. Tucker Nursing Care Center – Roddey Pavilion Nursing Home, Columbia, SC

3

## Veterans Nursing Homes

Tucker Nursing Care Center – Stone Veterans Pavilion, Columbia, SC

Richard M. Campbell Veterans Nursing Home, Anderson, SC

Veteran's Victory House, Walterboro, SC

1

## Central Medical Clinic, DIS Northeast - Midlands Center Campus, Columbia, SC

# DIS – State-wide Services



Richard M. Campbell  
Veterans' Nursing Home -



## Patrick B. Harris Psychiatric Hospital



Tucker Nursing Care Center –  
Roddey Pavilion –  
General Nursing Home  
Stone Pavilion –  
Veterans Nursing Home



Veterans' Victory House -  
Veterans Nursing Home



**G. Werber Bryan Hospital –**  
**Adult Services**



**G. Werber Bryan Hospital –**  
**Forensic Services**



G. Werber Bryan Hospital -  
William S. Hall Psychiatric  
Institute, Child & Adolescent  
Services



## Sexually Violent Predators Treatment Program

**Morris Village Alcohol and  
Drug Addiction Treatment  
Center**

# G. Werber Bryan Psychiatric Hospital (BPH)



## Adult, Child & Adolescent and Forensic Psychiatric Services

Stuart J. Shields, MSW, MHA, Director



- BPH was opened in February 1978 (accepting patients full time, first of the planned regional hospital, from the Village Concept.)
- Treatment Team (Multifactor model of assessment/treatment evaluation)
- Licensed Clinical Staff, Activity Therapists, Nursing, Certified Physicians, Nurse Practitioners, and Recovery Educators.



**Acute Services Bed Capacity = 66**

**Extended Care Services Bed Capacity = 127**

**Medically Enhanced Beds (7)**



# G. Werber Bryan Psychiatric Hospital

William S. Hall Psychiatric Institute  
Child & Adolescent Services



D  
I  
S  
- BPH WSHPI – C&A

Holly Scaturo, MSN, RN

Acting Director, William S. Hall Psychiatric Institute  
at Bryan Psychiatric Hospital



## LODGE C – ACUTE PROGRAMS

**Adolescent Acute – Ages 13 – 17, 26 Beds**

**Child Acute – Ages 4 – 12, 9 Beds**

**Average LOS: 21 – 30 Days**

**Types of Admissions – Involuntary, Voluntary**



## William S. Hall Psychiatric Institute Child & Adolescent Services



LODGE D – DUAL DIAGNOSIS

Ages 13-17, 16 Beds

Average LOS: 77-90 days

Types of admissions-Involuntary, Voluntary, Judicial



DIS –  
BPH - Beds

# G. Werber Bryan Psychiatric Hospital

## Forensic Treatment Services

Contract Services Provided by  
Correct Care Recovery Solutions (CCRS)



Stuart J. Shields, MSW, MHA, BPH Director

DIS – BPH Forensic Services

## BPH – Forensic Treatment Services



**Admission to the Inpatient Hospital Service is based on the person's legal status.**

**Patients are admitted on court order set up by the authority  
Of statutes of the State of South Carolina.**



## BPH – Forensic Treatment Services



**The Bryan Hospital Forensic Services provides two forensic mental health programs:**

**Pretrial**

**Psychosocial Rehabilitation Program (PRP)**

## BPH – Forensic Evaluation Services (FES)



**Evaluates adults and children referred by both General Sessions and Juvenile Courts.**

**Evaluations are for competency to stand trial and criminal responsibility.**

**In 2018, there were 1,152 court-ordered forensic evaluations (Adults-1,027 evaluations and Child-125 evaluations) completed.**



## The NGRI Outreach Clinic

monitors NGRI clients in the community to ensure compliance with the Circuit Court's conditions for discharge.



# Patrick B. Harris Psychiatric Hospital Adult Services



**Allen M. McEniry, M.B.A.**  
**Director**

## HARRIS PSYCHIATRIC HOSPITAL

### PROGRAM:

**Harris Hospital operates 131 beds in a facility that has a licensed capacity of 200 beds.**

**The adult psychiatric services provided are accredited by The Joint Commission and certified by CMS (Centers for Medicare & Medicaid Services).**

**Patients meeting the legal and clinical standards for involuntary admission are screened by community mental health centers or local emergency departments before referral and admission to Harris Hospital.**



# Morris Village

## Alcohol and Drug Addiction Treatment Center



George McConnell, M.Div., CSAC  
Director



## History

- The Village opened in 1975 to serve patients throughout the 46 counties of the state of South Carolina.
- The Morris Village treatment program was an outgrowth of a pilot 56-bed addiction treatment program housed at Crafts-Farrow State Hospital from 1971 until completion of the current facility in 1975.
- The Village was designed as a typical small residential community. Fourteen cottages (patient living areas) were located on the periphery of the campus, while administrative offices, an infirmary and a library were located in the interior surrounded by a central court yard.

# SEXUALLY VIOLENT PREDATORS TREATMENT PROGRAM

Contract Services Provided by  
Correct Care Recovery Solutions (CCRS)



**New Correct Care Recovery Solutions SVPTP Building  
Broad River Correctional Institution Campus**

## Sexually Violent Predator Treatment Program



### **A SEXUALLY VIOLENT PREDATOR IS...**

a person who has been convicted of a sexually violent offense

suffers from a mental abnormality or personality disorder

and is likely to engage in the predatory acts of sexual violence if not confined in a secure facility.



## Sexually Violent Predator Treatment Program



**The first person was admitted in February 1999.**  
**As of February 2019:**

- Admissions: 345
- Discharges (Releases): 123
- Deaths: 15
- Current Census 205
- Projected growth: 12 residents a year



## FACTS

# Q & A

# PROFILES OF SELECTED COMMUNITY AND INPATIENT MENTAL HEALTH FACILITIES

## Profiles of DMH Components

The following profiles were developed by the Department of Mental Health to highlight a few of the many outstanding people that work to aid those with mental illness. The original interviews were conducted by State Director John H. Magill.

The highlighted facilities are included in the February 19, 2019, meeting packet.

### Community Mental Health Center Profiles

1. Aiken-Barnwell Mental Health Center - 4/3/15
2. Anderson-Oconee-Pickens Mental Health Center - 3/15/18
3. Beckman Center For Mental Health Services - 10/12/15
4. Berkeley Community Mental Health Center - Spring 2012
5. Catawba Community Mental Health Center - 1/4/15
6. Charleston / Dorchester Mental Health Center - Fall 2012
7. Coastal Empire Community Mental Health Center - 7-13-15
8. Columbia Area Mental Health Center - 5/2/18
9. Greenville Mental Health Center - 8/25/15
10. Lexington County Community Mental Health Center - Fall 2011
11. Orangeburg Area Mental Health Center - 2/1/17
12. Pee Dee Mental Health Center - 6/12/15
13. Piedmont Center For Mental Health Services 10/23/15
14. Santee-Wateree Mental Health Center - 9/25/15
15. Spartanburg Area Mental Health Center - Fall 2012
16. Tri-County Community Mental Health Center 11/10/15
17. Waccamaw Center For Mental Health - 1/24/15

### Inpatient Facility Profiles

1. C.M. Tucker Nursing Care Center - Roddey Pavilion - Summer 2012
2. C.M. Tucker Nursing Care Center - Stone Pavilion - Fall 2011
3. G. Werber Bryan Psychiatric Hospital - Fall 2012
4. Morris Village Alcohol and Drug Addiction Treatment Center - Fall 2011
5. Patrick B. Harris Psychiatric Hospital - 11/20/14
6. Richard M. Campbell Veterans Nursing Home - Spring 2012
7. Veterans Victory House - Summer 2012
8. William S. Hall Psychiatric Institute - Spring 2012

### SCDMH Commission Profile - Spring 2013

### Mental Health Advocates Profile - Spring 2013

DMH  
OPERATES A  
NETWORK OF  
SEVENTEEN  
COMMUNITY  
MENTAL HEALTH  
CENTERS,  
42 CLINICS,  
FOUR  
HOSPITALS,  
THREE  
VETERANS'  
NURSING  
HOMES, AND  
ONE  
COMMUNITY  
NURSING HOME.

### DMH HOSPITALS AND NURSING HOMES

#### Columbia, SC

G. Werber Bryan Psychiatric Hospital

William S. Hall Psychiatric Institute (Child & Adolescents)

Morris Village Alcohol & Drug Addiction Treatment Center

C.M. Tucker, Jr. Nursing Care Center - Stone Pavilion (Veterans Nursing Home)

C.M. Tucker, Jr. Nursing Care Center - Roddye Pavilion

#### Anderson, SC

Patrick B. Harris Psychiatric Hospital

Richard M. Campbell Veterans Nursing Home

#### Walterboro, SC

Veterans Victory House (Veterans Nursing Home)

## DMH HISTORY AND DEMOGRAPHICS

South Carolina has a long history of caring for those suffering from mental illness. In 1694, the Lords Proprietors of South Carolina established that the destitute mentally ill should be cared for by local governments. The concept of "Outdoor Relief," based upon Elizabethan Poor Laws, affirmed that the poor, sick and/or disabled should be taken in or boarded at public expense. In 1762, the Fellowship Society of Charleston established an infirmary for the mentally ill. But it was not until the 1800's that the mental health movement received legislative attention at the state level.

Championing the mentally ill, South Carolina Legislators Colonel Samuel Farrow and Major William Crafts worked zealously to sensitize their fellow lawmakers to the needs of the mentally ill, and on December 20, 1821, the South Carolina State Legislature passed a statute-at-large approving \$30,000 to build the South Carolina Lunatic Asylum and a school for the 'deaf and dumb'. This legislation made South Carolina the second state in the nation (after Virginia) to provide funds for the care and treatment of people with mental illnesses.

The Mills Building, designed by renowned architect Robert Mills, was completed and operational in 1828 as the South Carolina Lunatic Asylum. The facilities

grew through the decades to meet demand, until inpatient occupancy peaked in the 1960's at well over 6,000 patients on any given day. From 1828 through 2011, South Carolina state-run hospitals and nursing homes treated over 947,000 patients and provided over 148,500,000 bed days.

In the 1920's, treatment of the mentally ill began to include outpatient care as well as institutional care. The first outpatient center in South Carolina was established in Columbia in 1923.

The 1950's saw the discovery of phenothiazines, "miracle drugs" that controlled many severe symptoms of mental illness, making it possible to "unlock" wards. These drugs enabled many patients to function in society and work towards recovery, reducing the need for prolonged hospitalization. Government support and spending increased in the 1960's. The South Carolina Community Mental Health Services Act (1961) and the Federal Community Health Centers Act (1963) provided more funds for local mental health care.

The South Carolina Department of Mental Health (DMH) was founded in 1964. In 1967, the first mental healthcare complex in the South, the Columbia Area Mental Health Center, was built. The centers and clinics have served over 2,800,000 patients, providing over

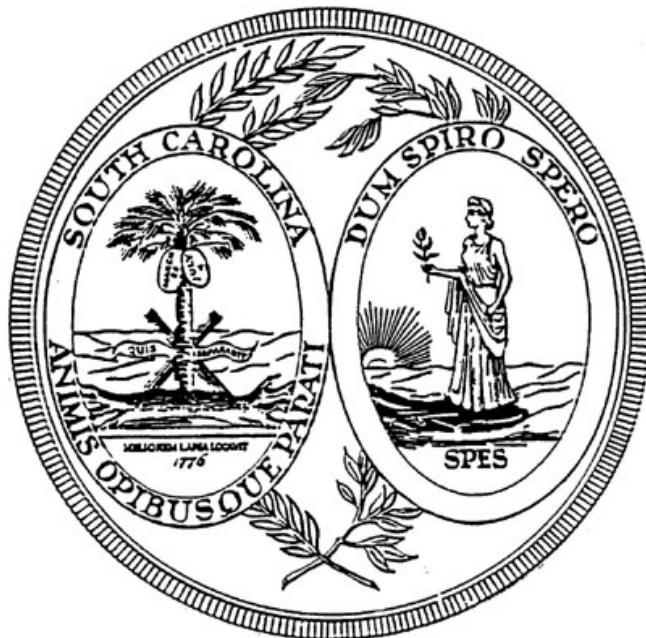
38,000,000 clinical contacts.

Today, DMH operates a network of 17 community mental health centers, 42 clinics, three veterans' nursing homes, and one community nursing home. DMH is one of the largest hospital and community-based systems of care in South Carolina. In FY11, DMH outpatient clinics provided 1,175,482 clinical contacts and DMH hospitals and nursing homes provided nearly 530,000 bed days. Last year, DMH treated nearly 100,000 citizens, including approximately 30,000 children and adolescents.

DMH  
MISSION:  
TO SUPPORT  
THE RECOVERY  
OF PEOPLE  
WITH  
MENTAL  
ILLNESSES.



Babcock Building Cupola



**SOUTH CAROLINA DEPARTMENT OF MENTAL HEALTH**  
**STATE DIRECTOR JOHN H. MAGILL**

**C. M. TUCKER, JR. NURSING CARE CENTER**  
**RODDEY PAVILION**  
**PROGRAM DIRECTOR AND NURSING HOME ADMINISTRATOR,**  
**NORMA JEAN MOBLEY**

**Summer 2012**



C. M. TUCKER, JR. NURSING CARE CENTER  
RODDEY PAVILION  
220 HARDEN STREET  
COLUMBIA, SC 29203  
(803) 737-5301

## C. M. TUCKER, JR. NURSING CARE CENTER RODDEY PAVILION

The C.M. Tucker, Jr. Nursing Care Center – Roddey Pavilion was established as the Division of Long-Term Care by the action of the General Assembly of South Carolina.

Roddey Pavilion opened in 1983, and was named in honor of State Senator Frank Laney Roddey, who served in the state senate from 1963 until his death in 1979. Senator Roddey, or “Son” Roddey as he was known to his constituents, served Kershaw, Lancaster, and York counties.

The Roddey Pavilion is comprised of T-shaped units, called neighborhoods, each with a nursing station at the center. Roddey Pavilion has been remodeled, but the basic layout of the neighborhoods has not changed.

At its inception, patients accepted for admission were primarily in need of long-term skilled or intermediate nursing care under medical supervision for physical/functional disabilities associated with underlying medical or neurological disorders. Patients with known or previously diagnosed psychiatric

disorders were admitted only if their behavior did not endanger themselves or others.

Today, admission requirements are the potential applicant needs nursing home level of care and Roddey Pavilion can meet their needs.

Roddey Pavilion offers residents a complete living environment, including medical care, nursing care, rehabilitative therapy, pharmacy services, recreational and therapeutic activities, social services, pastoral care, and dietary services.

Currently, residents of Tucker Center range in age from 32 years to 96 years old. The younger residents are primarily patients who sustained traumatic brain injuries from motorized vehicle accidents. Many of the residents of Roddey Pavilion have some type of secondary or historic psychiatric diagnosis, but their primary need is for intermediate or skilled nursing care.

Roddey Pavilion residents enjoy typical nursing home activities, such as playing bingo, sing-alongs, going to the mall, and

watching movies. Additionally, participation in unique activities such as an acting group called “The Tucker Players” and a therapeutic art program called “The Art of Recovery” is encouraged at Roddey Pavilion. All of the activities serve to increase residents’ feelings of well-being and positive behavior.

The Roddey Pavilion is accredited by The Joint Commission, and has received The Gold Seal of Approval™ from The Joint Commission each year since 2000. The Gold Seal of Approval™ is the highest level of accreditation given by The Joint Commission. It is presented to facilities that exceed state and federal requirements in compliance with standards of care specific to the needs of residents, including infection prevention and control, leadership and medication management.

RODDEY  
PAVILION IS  
ACCREDITED  
BY THE JOINT  
COMMISSION.



Roddey Pavilion Courtyard



Norma Jean Mobley,  
Program Director and  
Nursing Home Administrator

THE CLOSE  
STAFF-RESIDENT  
INTERACTIONS  
ENABLE EARLY  
DETECTION  
AND  
ADDRESSING OF  
PROBLEMS.

## NORMA JEAN MOBLEY, PROGRAM DIRECTOR AND NURSING HOME ADMINISTRATOR

Norma Jean Mobley grew up in Kershaw when the mill industry still thrived. Both her parents worked in the textile industry and they wanted better for their daughter, so they stressed the importance of a college education. She took their advice, and received her bachelor's degree in Pharmacy from the Medical University of South Carolina.

Mobley's interest in Pharmacy was sparked by having an aunt who spent time in and out of the State Hospital. She would go with her grandmother to pick up her aunt, and on one of these visits was sent to the pharmacy to pick up her aunt's prescriptions. She was impressed by the appearance of the staff and the environment,

and that impression, coupled with a natural talent for science and math, made Pharmacy a good fit. After completing her education, Mobley lived and worked all over the United States, moving with her husband who was career Navy. When he retired she became a pharmacist with DMH.

Mobley began her career at Tucker Center in 1995 as staff pharmacist. Within two years she was promoted to Pharmacy Chief and remained in that position until 2008, when she became nursing home administrator and program director for Roddey Pavilion.

Moving from pharmacy to administration seemed like a natural transition. She com-

pleted the DMH Mentoring program and went on to complete the Administrator in Training program before becoming a licensed Nursing Home Administrator.

Mobley feels Roddey Pavilion is special because services are provided in-house by staff and residents are like family. She believes the close staff-resident interactions enable early detection and addressing of problems.

Mobley's basic values when it comes to her job at Roddey Pavilion are twofold: "Whether you're sweeping the floors or an executive, do the best job you can; and always treat people like you want to be treated."

## RUSS HUGHES, PHD, CITIZENS ADVISORY BOARD MEMBER

The Citizens Advisory Board (CAB) meets bi-monthly, its members serve as advisors to the leadership of Tucker Center as well as assisting in better acquainting the public with the needs and activities of the Tucker Center. This volunteer board also recognizes and rewards exemplary staff members. The rewards are funded by a former CAB member to support morale. Several CAB members have had family at Roddey Pavilion, and they speak about how much it meant to them to have this staff.

Russ Hughes, PhD, a native of Gainesville, Georgia graduated from Wofford College. He spent four years in the military before receiving his Ph.D. from the University of Alabama

in Experimental Psychology.

Dr. Hughes is a retired DMH employee who began his career in 1984 when he was hired as executive director of the Coastal Empire Mental Health Center. Five years later, he came to work at Tucker, where he served for 10 years before moving to Bryan Psychiatric Hospital as director. He was eventually named director of Columbia Behavioral Health Systems. Hughes completed his DMH career at Central Office and is enjoying retirement by working part-time as executive director of the Dorn Research Institute, a non-profit organization affiliated with the Veterans Administration.

Dr. Hughes feels Tucker is a very special place. It is a place



Russ Hughes,  
Citizens Advisory Board Member

to live and thrive; a home. Dr. Hughes notes that Tucker Center, and Roddey Pavilion in particular, represent a special niche in South Carolina; able to offer residence to individuals who are more difficult to serve and that private nursing homes do not want to take.

Dr. Hughes finds the biggest challenges residents face are not disease, death, or disability, but boredom, loneliness, and helplessness. He feels going beyond clinical care, and addressing these issues facilitates residents' happiness. Dr. Hughes feels very fortunate to have had so many opportunities in his life and feels he can give back in retirement by his work on the CAB.

## SHIRLEY BANNISTER, DIRECTOR OF NURSING

Shirley Bannister has been with DMH since 1986 and Tucker Center since 1993. She became director of Nursing at Roddey Pavilion in 2010. Born and raised in Columbia, she knew from a young age that she wanted to be a nurse. Her relationship with her great grandmother inspired her to focus her career on the elder population.

Bannister observes that many residents do not have family involvement in their lives, so it is important to her that staff care and bond with them. She feels leadership sets the example of the importance of staff and resident connection. "This is the reason we are here," she explains.

Recently, a resident in the final

stages of terminal illness requested a "Hoe Cake." No one had heard of such a thing so Bannister asked her mother about it. Not only did her mother know what it was, but she baked one for the resident. "Nursing is more than doing an eight hour job. It is about giving back," she says.

Bannister shares with great pride a recent Department of Health and Environmental Control (DHEC) survey where Tucker made history, earning no citations. According to DHEC, this is a very rare occurrence. Bannister stressed how teamwork was essential to this significant accomplishment. "It takes teamwork to do what we do for the residents," she said. "It's an awesome thing."

Bannister feels another big contributor to the excellent survey results was the new Nursing CNA program, which started in 2011. Of 49 graduates, 38 are employed at Tucker, and the number of patient care hours delivered this year has increased by 3,000. This has increased patient quality of care outcomes and is the foundation for a succession plan as older staff retires.

Summing up her personal and career perspective, Bannister states, "We represent the Department of Mental Health, but we also represent ourselves as nurses. As director, I want the community to know I'm here for our long term care residents and for their families because that is so important."



Shirley Bannister,  
Director of Nursing

"NURSING IS  
MORE THAN  
DOING AN  
EIGHT HOUR  
JOB. IT IS  
ABOUT GIVING  
BACK."

**BANNISTER**

## GARY EWING, MD, PHYSICIAN

Gary Ewing, MD, began working at Roddey Pavilion in October 2011 and says the experience has exceeded all his expectations. He calls the staff "phenomenal in terms of the lengths they go to take care of sometimes difficult patients." He likes working with this population and says he really appreciates them as people, rather than "people with psychiatric diagnoses."

Dr. Ewing was born in Kansas City, Missouri, and moved to California as a child. He initially wished to play sports, but in late high school and early college he became interested in Medicine. He attended medical school at Loma Linda University, where he also received his master's degree in public

health. He's board certified in Occupational Medicine and Preventive Medicine from the University of Pennsylvania.

Dr. Ewing previously worked at the University of South Carolina (USC) teaching occupational medicine at the College of Medicine. Prior to that, he served as Residency Director for USC's Preventative Medicine Program. Dr. Ewing's decision to work at Roddey Pavilion was fueled by his desire to provide direct patient care.

An area of focus for Dr. Ewing is increasing the collaboration of DMH with USC. He believes the opportunities in this area are remarkable and recently started work on bringing preventive medicine residents

to Tucker. He feels it is a win-win since students will be able to see patients here they would otherwise not have access to at other places and the patients will receive more quality physical health care in the area of prevention. DMH State Director John H. Magill is very supportive of this concept.

Dr. Ewing feels it is very important to make Roddey Pavilion a home environment, and says after residents sent to the hospital return to Roddey Pavilion they say they are so glad to be "home."

Dr. Ewing believes working at Roddey Pavilion is an opportunity to touch people at a very basic level, not just the residents, but their families as well.



Gary Ewing, MD,  
Physician

## ERIC S. JONES, ACTIVITY THERAPIST SUPERVISOR AND ADMINISTRATOR IN TRAINING



Eric S. Jones  
Activity Therapist Supervisor

TEAMWORK  
IS A MAJOR  
STRENGTH  
OF TUCKER.

Activity Therapist Supervisor Eric Jones oversees resident social activities, such as cook-outs, card games, checkers, bingo, karaoke, and dances. Jones plans activities with the goal of getting the residents mentally engaged and physically moving. Jones also orchestrates off-site activities, including dining out, fishing trips, and the annual trip to the South Carolina State Fair.

Working at Tucker has been a life-changing experience for Eric Jones. Approaching nine years at the Center, Eric remembers being “a young, reckless college student” and not really thinking about life in important terms. Coming to Tucker, made him reflect on the important things in his life, particularly his family. Jones says even people in his neighborhood saw changes in him after he began working at Tucker.

Jones received his bachelor’s

degree in Recreation from Benedict College and was hired at Tucker right after completing his internship. He was always self-directed and was soon promoted to Activity Therapist Supervisor at Roddye Pavilion. After being named Tucker’s Employee of the Year in 2011, Jones entered the DMH Mentoring program.

Jones understands families’ hesitancy in visiting nursing homes; afraid of seeing their loved ones in that type of setting. He works hard to reach out to families to keep them involved.

Born in Chester and raised by his grandparents, Jones credits his experience as a youth working on the farm with providing both a solid work ethic and a vehicle with which to connect to the residents. While he did not foresee becoming an activity therapist, he always felt he was an “old spirit,” patient, quiet, and understanding.

Jones credits his internship at Tucker for making it “click” for him. He feels as though working with the elderly is his true calling. He would like to serve his entire career at Tucker assisting residents and their families.

Jones stresses that patience is an important quality he brings to his job, explaining, “our folks don’t ask to be here. If they had the opportunity they would be home, living life on their own terms.” He connects with the residents on a personal level and makes a point of singing with them on a regular basis.

Jones recalls seeing residents when they first move in, often bedridden and not speaking. He finds it rewarding when they once again enjoy participating in activities and going out of the Center on trips. “We help them get their lives back.”

## TRACEY WILLIAMS, CERTIFIED NURSING ASSISTANT (CNA)-C

Tracey Williams is a CNA-C (the C means she supervises the floor CNAs).

Her mornings start by making rounds, greeting residents, getting reports, and speaking with her supervisees on what needs to be done. Other duties include attending care conferences and providing in-service training.

She fills in if there is a staff shortage, and sometimes even if there is not. Williams says a

big part of her supervision style is to not ask anyone to do something she herself wouldn’t want to do.

Born in Columbia and a lifelong resident, Williams knew she wanted to go into nursing since the age of 18. She received her CNA from Mansfield Business College and knew from her first nursing home job that she had made the right choice.

She feels compassion and love for the residents. “You can’t

make a person care. Caring has to be inside of someone, and I know it is inside of me,” she said.

Williams believes teamwork is a major strength of Tucker. When surveyors came on a Sunday, Williams came in too; to support the Center and the team.

Williams’ future goal is to become a nurse, and plans to return to school later this year.



Tracey Williams  
CNA-C

## PAMELA SMITH, DIRECTOR OF SOCIAL WORK

Pamela Smith's relationship with her grandparents was a big influence on her desire to work with elders. Her grandfather was a state superintendent which inspired her to work in the public sector. She also has both professional and personal experience with people with mental illness and feels this helped spark her interest in the field. Pamela hails from Camden and received her bachelor's degree in communications from Winthrop University.

Smith was hired at Roddey Pavilion as director of Social Work in 2011. Prior to joining the Roddey team, she had been a state surveyor in Long Term Care at the Department of Health and Environmental Control. She later worked for

the Department of Social Services and was eventually promoted to surveyor for nursing homes. During this time, Smith's interaction with the residents made her want to serve them more directly, so she returned to college and completed her master's degree in Social Work at the University of South Carolina.

Smith believes that the role of social workers in nursing homes is looking at the big picture: focusing on resident rights, advocating for residents, educating staff on residents' rights, and making sure residents participate in decision making about their care.

While in graduate school, Smith chose Tucker Center for her internship. "I had a won-

derful student experience here," she said. She recalls being allowed to do innovative things and enjoyed facilitating therapeutic groups for residents and support groups for family members.

As director of Social Work, Smith would like to see group therapy offerings expanded for both residents and family. She would also like to see her social work staff provide in-service training for non-social work staff.

Smith feels good about her decision to work at Tucker, "Some days can be tiring and frustrating, but I'm always eager to return the next day. It's a challenging job, but it's very rewarding and I love the residents here!"



Pamela Smith,  
Director of Social Work

THE TUCKER CENTER AND THE DEPARTMENT OF HEALTH AND HUMAN SERVICES FREQUENTLY COLLABORATE TO MEET THE NEEDS OF SHARED CLIENTS.

## SAM WALDREP, DEPUTY DIRECTOR FOR LONG TERM CARE AND BEHAVIORAL HEALTH FOR DHHS

The Tucker Center and the South Carolina Department of Health and Human Services (DHHS) frequently collaborate to meet the needs of shared clients. Deputy Director Sam Waldrep works with the staff of Roddey Pavilion to ensure residents are receiving the best possible care.

Waldrep received his bachelor's degree in sociology and anthropology and his master's degree in sociology with a concentration in social gerontology from the University of South Carolina. He also earned a post-graduate certificate in gerontology from the University of Michigan. Waldrep became involved with the eld-

erly right out of college, working at the State Office of Aging. He came to DHHS in the early 1980s where he worked in Community Long Term Care, reviewing nursing homes.

Waldrep's long term view for Tucker is to serve niche populations: HIV, Huntington's, and more. His vision of long-term care in South Carolina involves both the community and nursing homes. DHHS has not added any new Medicaid nursing home capacity in South Carolina in about 12 years, which is significant considering the rapid growth of the older population.

Nursing homes have also been impacted by a reduction in

Medicare rates. Waldrep anticipates more monies will soon be available for facilities that carve out special niche populations and this is an opportunity for Tucker.

According to Waldrep, DHHS is piloting a project "Complex Care," in which significantly higher reimbursement rates are given to nursing homes to take care of very sick people with unique and complex needs who may not be a good fit for traditional nursing homes. And they are aware of changing treatment requirements of veterans returning from war and are looking for optimal ways to treat these new special needs.



Sam Waldrep,  
Deputy Director for  
Long Term Care and  
Behavioral Health for DHHS



TO SUPPORT THE RECOVERY OF  
PEOPLE WITH MENTAL ILLNESSES.

**SC DEPARTMENT OF  
MENTAL HEALTH**

2414 Bull Street  
Columbia, South Carolina 29201

Phone: (803) 898 - 8581

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**C. M. TUCKER, JR. NURSING CARE CENTER  
RODDEY PAVILION**

220 HARDEN STREET  
COLUMBIA, SC 29203  
(803) 737-5301

**SPOTLIGHT**

*The following is an excerpt of a letter from the daughter of a Roddey Pavilion resident who passed away in February, 2012.*

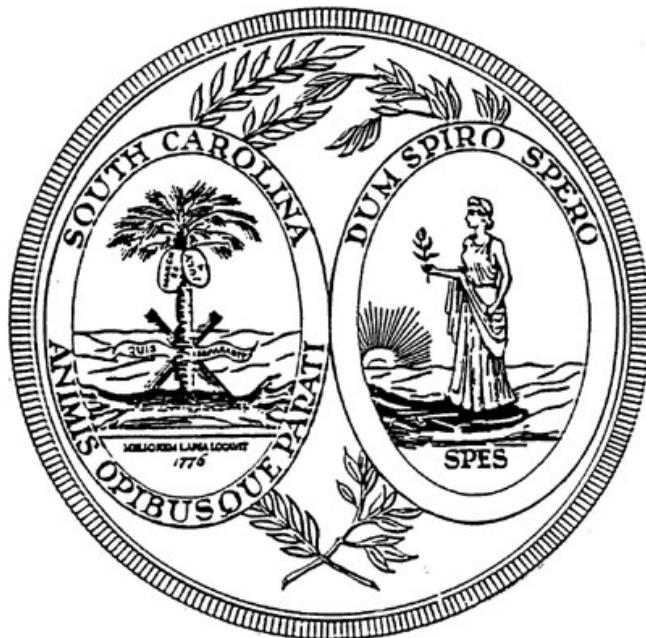
To Our Family at Tucker Center:

You have no idea how lucky my brother Jack and I, as well as all my family, feel that we found the Tucker Center for my mother. We looked at several nursing homes and did not really like many of them. Some of them were fancy but none of them suited us. We went to Tucker Center and walked through the halls, which were clean and odor free. We saw the wonderful patience, care, and most of all respect that the physicians, nursing staff, and nursing assistants gave to the residents. We chose your facility for our mother because of this, and feel blessed that we found you. In all the years I have been coming I have never witnessed any disrespect for a patient.

Jack and I thank you for the loving care given to Mother. She loved you all so much. She was happy and content and that was because all of you were so caring and kind to her. So many of you touched her, came to see her, gave her hugs, stopped by when she called out for you, took extra time to say hello or just let her kiss your hand and tell you how pretty you were. She did not distinguish between men and women. She thought all of you were pretty.

God bless all of you,

Billie McMahon,  
Daughter of Gladys Richardson



**SOUTH CAROLINA DEPARTMENT OF MENTAL HEALTH**  
**State Director John H. Magill**

**C. M. TUCKER JR., NURSING CARE CENTER  
STONE PAVILION**

**Nursing Home Administrator Frances Corley**

**Fall 2011**



## C. M. TUCKER, JR. NURSING CARE CENTER STONE PAVILION

2200 Harden Street  
Columbia, SC 29203  
(803) 737-5301

The Stone Veterans' Pavilion, part of the C. M. Tucker, Jr. Nursing Care Center, is one of three DMH nursing care facilities dedicated to providing long-term care to South Carolina veterans. Stone Pavilion is licensed by the state of South Carolina and is certified by the Centers for Medicare/Medicaid and the Veterans Administration. It is accredited by The Joint Commission. Stone currently serves 76 veterans in its two units.

In 1908 the South Carolina General Assembly appropriated state funds to establish the Confederate Soldiers and Sailors Home, as there was no federal assistance for these veterans available at the time. This home was located at the corner of Confederate Avenue and Bull Street in Columbia, on land belonging to the Regents of the State Hospital. In 1930 the U.S. Department of Veterans Affairs was established and state programs were expanded. Additionally, federal funding increased per diem payments and allowed for construction of dedicated facilities to serve veterans. In 1957 the Confederate Soldiers and Sailors Home closed due to reduced numbers in need. In 1964 the Veterans Administration began a grant

program for construction of State veterans' homes. In 1969 the SC General Assembly passed laws to authorize the DMH Commission to establish a South Carolina War Veterans Home to provide treatment for SC War Veterans who were mentally ill. Admission requirements were the same as other DMH facilities, except this home was for SC residents who were honorably discharged war veterans.

On April 1, 1971 the E. Roy Stone War Veterans Pavilion, as Stone was originally known, was opened. It was named in honor of Greenville resident E. Roy Stone, Jr. (1912-2001), a WWII Navy veteran nicknamed "Mr. Veteran" and "Mr. Legionnaire." Stone was a distinguished member of the American Legion and served on numerous national Legion committees. He was national Commander of The American Legion by vote of the National Convention in 1987, one of only 10 elected since 1919.

After returning to SC following WWII, Stone found many GIs waiting for beds and worked tirelessly to establish nursing homes for veterans. In addition to his service with the American Legion, Stone founded the Goodfellows

Club, which provided food to needy families at Christmastime, and was active in both the Lions Club and the Boy Scouts of America. He also served as the State Chairman of the SC Agency for Vocational Rehabilitation.

There are almost 409,000 veterans residing in South Carolina, representing approximately 9% of the state's population. DMH is the second largest provider of nursing home bed days in South Carolina, and currently has 516 beds dedicated to veterans, representing a third of its total inpatient beds. It is noteworthy that, though Stone is part of DMH, admission is based on a person's status as a veteran and is not associated with having any mental health problems.

Stone offers veterans a complete living environment by providing on-site medical care, nursing care, rehabilitative therapy, pharmacy services, recreational and therapeutic activities, social services, pastoral care, dietary services, transportation services, beauty and barber services, and laundry services. Stone maintains a 98% occupancy rate. Most admissions are referred from the Richland, Lexington, Sumter, Rock Hill, and Aiken areas.

Stone has many varied and rich

relationships in the community. It partners with Fort Jackson, the VA, Benedict College, and the American Legion Post in volunteer, internship, and recreational activities.

As part of 2011's Veterans' Day activities, Fort Jackson's Commanding General James M. Milano visited Stone residents, and the Fort Jackson NCO club provided a cookout for them. Residents were also guests at a recent recruit graduation at Fort Jackson, and many attended the Veterans' Day parade in downtown Columbia.

In addition to a heavy rotation of activities, residents of Stone enjoy a unique aesthetic. The walls of Stone Pavilion are graced with over 150 pieces of art. This recent donation was coordinated by the Sun City Veterans' Association, located in Hilton Head, S.C. The group contacted various groups in the art community to donate works of art depicting patriotic images, abstracts, relaxing landscapes, and other images to make the veterans feel more at home. In addition to enhancing the aesthetic of Stone Pavilion, the group also donated 300 paperbacks, 25 puzzles, 150 movies, and a VCR.

## FRANCES CORLEY, R.N., NURSING HOME ADMINISTRATOR - STONE PAVILION



Frances Corley, R.N.,  
Nursing Home Administrator -  
Stone Pavilion

"YOU CAN'T  
FIND A  
GREATER  
POPULATION.  
CARING FOR  
VETERANS IS AN  
HONOR."

Even though she's less than 5 feet tall, Frances Corley, R.N., likes a big challenge. While enjoying a successful career with DMH as a nurse, Corley decided she wanted to run a nursing home. As a result, she went back to school, earned a degree in Health Administration, and obtained her Nursing Home Administrator license.

Being the administrator for a nursing home isn't for the faint of heart. "We are the most regulated industry there is," said Corley. "We have to be prepared at all times."

And what does Stone's administrator for the last eight years have to be prepared for? Visits, inspections, and surveys from any one of the numerous regulators involved in the industry, such as DHEC, The Joint Commission, and

the Veterans Administration, to name a few. Family members and residents also provide measures of review and feedback.

Corley notes that during the last few years Tucker has undergone a significant amount of scrutiny. "We always come out on top," she says.

Corley's 44 year Career began at Columbia's Baptist Hospital (now Palmetto Health Baptist), then with a private physician's practice (who, coincidentally, was the brother of celebrated Dr. William S. Hall, the Agency's first state superintendent). She joined DMH in 1981.

Originally from Chester County, Corley remembers wanting to be a nurse even as a child, and enrolled in nursing school one month after

graduating from high school. While training, she lived in the historic Mills Building on DMH's Bull Street campus.

One challenge Corley relishes is the upcoming planned renovation of the 40-year-old Stone building. "It's one of the most exciting things I've dealt with in my career."

More big challenges are in Stone's future, with an increasing demand for long-term care for younger veterans of the wars in Iraq and Afghanistan. Corley is already looking at what their needs will be, including cell phones and internet access.

All of these challenges are part of the job for Corley, though. "Veterans so deserve it," she says. "You can't find a greater population. Caring for veterans is an honor."

## SARAH KIRCHMAN, R.N., PROGRAM ADMINISTRATOR



Sarah Kirchman, R.N.,  
Program Administrator

Sarah Kirchman, a 25-year DMH employee, serves as the program administrator for DMH's three veterans' nursing homes: Stone Pavilion, Richard M. Campbell Veterans Nursing Home in Anderson and Veterans Victory House in Walterboro. Throughout her tenure with the Agency, she's been based at Tucker, where she previously worked in the areas of Quality Assurance, Risk Management, and Admissions.

As a young girl in North Carolina, Kirchman wanted

to be a nurse. "I knew it was exactly what I wanted to do," she says, because she enjoyed helping and working with others.

She earned her nursing degree at East Carolina University, but her military service brought her to South Carolina, when, in 1973, she was stationed at Fort Jackson. After serving in the Army, Kirchman worked for several years at DHEC before getting a job with Tucker Center.

Kirchman's duties as adminis-

trator include helping veterans receive medical care and referrals to needed resources. She works closely with the state Veterans Affairs offices, and coordinates with the VA to provide acute care for Stone's residents at VA hospitals. She also works closely with VA social workers regarding continuity of care and referrals: "The VA is a huge support system for us."

Kirchman is "ecstatic" about the planned major renovation of the 40-year-old Stone building. "It's one of the most

## SARAH KIRCHMAN, R.N., PROGRAM ADMINISTRATOR

exciting things I've dealt with," she says. Her goal for the renovation is to serve more veterans in the area. "I'm really hoping that we can increase our bed capability. The demand in Columbia is huge. We are the only state veterans' nursing home in this part of the state. The need is there."

Kirchman would also like to see more homes for veterans in other parts of South Carolina. Recent wars will likely result in an increased need for

nursing home services for veterans, and both Campbell and Victory House stay at capacity.

DMH does a "tremendous service" for the veterans, Kirchman says, providing over 500 dedicated nursing home beds. The beds fill up quickly and have waiting lists, attesting to the quality of care South Carolina veterans receive at DMH, as well as the need for services.

One of the best things about

working with veterans is being able to speak with them about their service. Kirchman considers them walking history books and notes that although some have cognitive declines, most remember their military years well and are happy to talk about their service to others.

Veterans have a special place in her heart. "We should all consider it an honor being in DMH and serving that population. They're just great."

STAFF  
CONSIDER THE  
STONE  
RESIDENTS AS  
WALKING  
HISTORY  
BOOKS AND  
ENCOURAGE  
THEM TO TELL  
THEIR STORIES  
OF MILITARY  
AND LIFE  
EXPERIENCE.

## KIMBERLY BUTTERFLY RUDD, M.D., DIRECTOR OF PROFESSIONAL SERVICES

Kimberly Rudd, M.D., didn't start medical school at USC with the intent of becoming a psychiatrist. After her third-year rotation at DMH's Bryan Psychiatric Hospital, though, she unexpectedly found her calling. She saw that patient recovery was very real and was fascinated with how clients' individual stories impacted their mental illness.

Now director of Professional Services at Tucker, Dr. Rudd got her initial exposure to Stone during her Geriatric Psychiatric fellowship. She joined DMH upon its completion, delivering psychiatric services to geriatric patients at Bryan Psychiatric Hospital.

Dr. Rudd feels blessed to be undertaking a new role with DMH. She became the medical director for Tucker in August of 2011, serving Stone Pavilion and Roddey Pavilion.

Her typical day starts with meeting with the nurses to receive the morning report. "I believe that the only way we can provide the excellent resident care that we need to provide is to have a close relationship with our nurses," said Dr. Rudd.

Next, she does daily rounds. "I try to change it up," she says, by having a flexible schedule between both of Tucker's nursing homes. That way, staff can ask questions as needed, and Dr. Rudd has the added benefit of meeting more residents. Psychiatric consults follow. Since there are only two psychiatrists serving Tucker at this time, these are a busy part of her schedule. Finally, she attends administrative meetings to ensure that Tucker stays current with all of its accrediting bodies' standards.

Originally from California, Dr. Rudd grew up in Charleston and completed her undergraduate work at the College of Charleston. She is married with two young sons; the family fills its time with school, soccer, movies, and just spending fun time together. She enjoys living in Columbia.

Dr. Rudd's philosophy of treatment entails providing excellent care to residents in all respects: housekeeping, activities, social work, physicians, nursing, and leadership. "It comes from everyone; everyone is involved with every resident" she says.

Her goal is for Tucker to be a center of excellence. "I want my parents, if they ever have a need, to come here."



Kimberly Butterfly Rudd, M.D.,  
Director of Professional Services



Yvette Frazier, B.S.,  
Activity Therapist

## YVETTE FRAZIER, B.S., ACTIVITY THERAPIST

Nothing is impossible to Activity Therapist Yvette Frazier. That determination helps Frazier dream big when it comes to bringing smiles to residents' faces. "I have a passion for what I do," she said.

Trips Frazier has planned include outings to Myrtle Beach, Fort Sumter, the Camden Cup, Fort Jackson graduations, and more. Regular activities at the facility include bingo, movies, visiting groups, happy hour (complete with family, virgin daiquiris, sparkling juices, and hors d'oeuvres), and the well-attended meet-and-greets with new Fort Jackson recruits.

Her current vision is for a grand ball at Tucker. "It will be an event you will never forget!" she said.

Frazier does not let financial barriers interfere; instead, she initiates creative ways to take part in activities for free or raise funds through outside sources. Her philosophy is simple: "Nothing is impossible. If you have a vision, it's possible."

She notes that all employees (housekeeping, nurses, administrative staff, management, etc.) at Stone function as de facto activity staff. "We function as a family here. We all come together because we are all trying to meet the same goal. And that is to keep the clients happy."

Originally from Greenwood, Frazier was a cheerleader and high school athlete who went on to graduate from Benedict College. She's been with DMH for 24 years.

Frazier feels a personal connection to the residents of Stone, in part due to having an uncle who was a veteran with mental health issues related to his service experience. Like her uncle, Frazier considers Stone's residents as family. "We love listening to their stories because everybody's got a story to tell." She leaves work each day thinking about what is planned for the next.

Frazier is dedicated to including veterans' families in the activities. Every month, she makes more than 70 calls to family members, sharing the activity schedule with them and personally inviting them to attend. Frazier and her activities positively impact the quality of life for the residents of Stone.

RESIDENTS ARE OFFERED A DIZZYING ARRAY OF ACTIVITIES RANGING FROM EXCURSIONS TO FORT SUMTER TO PAVILION "HAPPY HOURS." FAMILY MEMBERS ARE INFORMED OF AND INVITED TO THE VARIOUS EVENTS.



Barbara Ladson,  
CNA-C, Unit 120

## BARBARA LADSON, LEAD CERTIFIED NURSING ASSISTANT (CNA), UNIT 120

Barbara Ladson's attachment to the residents of Stone is apparent. She recounts a song from her youth with the lyric, "be kind to old people because one day you gonna get old too!"

Ladson has worked at the Tucker Center for 21 years. Before coming to DMH, she worked as a CNA at MUSC, and prior to that worked in a sewing factory. She was born in Charleston and graduated from the Charleston Business Institute for Nursing.

Ladson's father was a WWII veteran, and while she was growing up she took care of him and really enjoyed doing it. Her Dad used to joke that one of his daughters should become a nurse, and she told him, "that would be me!"

Ladson says she loves coming to work; the residents make her day and she wants to return the favor. Her approach to the residents is one of respect, affection and acceptance. She says, "This is what I love doing, and any-

thing you love doing you do your best at."

Ladson's philosophy is simple: "Caring for people is the main thing. You've got to love everybody. A few clients don't see their family members on a regular basis and you have to take them up under your wing and let them know that they're loved and that somebody cares."

## STEPHANIE KEMP, R.N., ACTING NURSE ADMINISTRATOR

One of Stephanie Kemp's top priorities is that Stone's residents be viewed as individuals first and foremost.

Kemp has worked for DMH 31 years, the last 26 at Tucker Center. Early in her career, she was part of a previous DMH program that provided funds for education and paid participants a full-time salary for going to school to become an RN and working part-time. "DMH has been great to me," she said.

Since becoming an R.N., Kemp has worked as a staff nurse, unit manager, and wound care specialist at

Tucker Center. Prior to coming to Stone Pavilion, she was the assistant nurse administrator at Roddey Pavilion. Since June of 2011, Kemp has held the position of acting nurse administrator at Stone.

Kemp oversees a 72 member nursing staff by being an approachable supervisor and maintaining an open door policy. In addition to managing the staff schedule and conducting morning meetings, she spends time on the units, checks in with staff, and provides hands-on supervision. "It's a good way to take the pulse of the unit and be proactive about addressing any

issues that arise," said Kemp.

"The CNAs take great pride in their work and are collegially competitive as to the level of resident care they provide, with positive results," she said. "They are very compassionate."

There is a high level of family involvement in care of the residents. Kemp stresses the importance of viewing each resident as somebody's parent, brother, or sister rather than just a number or a "patient."

Kemp's philosophy is, "resident care is number one."



Stephanie Kemp, R.N.,  
Acting Nurse Administrator

## PAM BANKS, CITIZENS ADVISORY BOARD MEMBER, DIRECTOR OF COMMUNITY EDUCATION, HOSPICE CARE OF TRI-COUNTY

Pam Banks has seen a lot of changes at Tucker during her 10 years of service on its Citizens Advisory Board (CAB). One constant that continues to impress her, though, is the facility's dedicated staff.

"The care here is excellent," she says, "and staff members have long work histories. They really go out of their way to do as much as they can with what they have. They love this place!"

Banks brings extensive nursing home and hospice expertise to her role as one of the Board's 11 voluntary members. And she's quite familiar with what it takes to be excellent in the industry.

After graduating from USC, Banks worked for 14 years in

a nursing home and then joined Hospice of Tri-County in Columbia, where she's served as director of Community Education for the last 12 years.

Along with local attorneys, clergy, school teachers, financial advisors, civic leaders, retirees, and past and current family members of residents, Banks assists both the facility and residents with internal and local matters, sharing her experience and knowledge.

The CAB also works to recognize and reward staff for tireless service, an area in which Banks is particularly passionate. "It takes an extremely special person to work here, and staff should be treated as such. They do it

because of their heart."

Hospice care is a growing service throughout the country, and through her work, Banks stresses education for residents and family about hospice before the actual need arises. The sooner a referral is made, the more support a hospice provider can give as a resident experiences end-of-life needs. "Hospice is a gift because it provides families with peace of mind, knowing that their loved ones died with dignity and without pain or suffering," said Banks.

Banks' dedication to her work is a tremendous asset to Tucker, the Board, and the community. "I love this place! I believe in my heart that God put me in both of my jobs."

THERE IS A  
HIGH LEVEL  
OF FAMILY  
INVOLVEMENT  
IN CARE OF  
THE  
RESIDENTS.



Pam Banks,  
Advisory Board Member



TO SUPPORT THE RECOVERY OF  
PEOPLE WITH MENTAL ILLNESSES.

**SC DEPARTMENT OF  
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**C. M. Tucker Jr., Nursing Care Center  
Stone Pavilion**

2200 Harden Street  
Columbia, SC 29203

(803) 737-5301

**A RESIDENT'S PERSPECTIVE—ERNEST H.**

Ernest has made significant strides since moving to Stone Pavilion from a private nursing home more than a year ago. When he arrived he was unable to walk; he could transfer himself to a wheelchair but had problems propelling it. He had frequent hospitalizations due to problems with aspiration.

Ernest now walks daily with the assistance of two rehabilitation aides. His distance has increased and he eventually hopes to walk independently. In the meantime Ernest uses a motorized wheelchair, which allows him to move freely about the building.

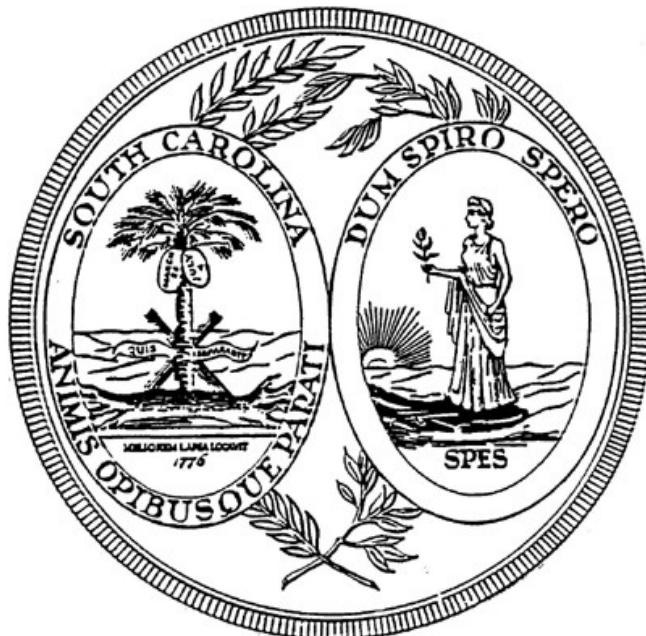
Ernest served in the Navy from 1941 to 1945, and was brought back for active duty due to critical needed skills as an aircraft mechanic, serving from 1951 to 1955.

Ernest's family says that Stone was highly recommended by the staff at the Veterans' Administration. That, along with the fact that as a veteran Ernest was eligible to live there and it would be less of a financial challenge, prompted the family to look to Stone.

Ernest's family says that he receives much more attention at Stone than his previous residence. They feel that

the staff understand his condition better and make real efforts to improve his quality of life. Ernest's family finds the staff to be more congenial and friendly and feels they interact with him (and them) more frequently.

Ernest is provided respiratory therapy twice a day using a special vest. This has resulted in no recent hospitalizations, and his family express great satisfaction with his care at Stone Pavilion.



**SOUTH CAROLINA DEPARTMENT OF MENTAL HEALTH**  
STATE DIRECTOR JOHN H. MAGILL

**G. WERBER BRYAN PSYCHIATRIC HOSPITAL**  
DIRECTOR OF ADULT SERVICES RALPH RANDOLPH  
DIRECTOR OF FORENSICS SERVICES HARVEY MILLER

Fall 2012



## G. WERBER BRYAN PSYCHIATRIC HOSPITAL

220 FAISON DRIVE  
COLUMBIA, SC 29203

803-935-7140 (CIVIL)  
803-935-5809 (FORENSIC)

## G. WERBER BRYAN PSYCHIATRIC HOSPITAL

G. Werber Bryan Psychiatric Hospital (Bryan) provides assessment, treatment, and evaluation of acute and long-term inpatient psychiatric patients.

The hospital's inpatient services feature a treatment team, composed of diverse health professionals, including licensed and board-certified psychiatrists, nurse practitioners, nurses, psychologists, social workers, activity therapists, nu-

trition and dietary staff.

The majority of patients treated in the Adult Services Division are involuntary admissions.

Bryan's acute lodges focus on getting patients back into the community as quickly as possible, with the goal of discharging patients within a month. The longer-term lodges' staff provides continued treatment and efforts to place

patients who have not returned to the community after 30 days in acute care.

Bryan offers a complete spectrum of care, from intensive acute services designed for almost immediate appropriate return to community treatment to extended long-term treatment with referral to other community resources (e.g. community care homes, nursing homes, etc.).

G. WERBER  
BRYAN  
PSYCHIATRIC  
HOSPITAL IS  
LICENSED BY  
THE STATE OF  
SOUTH  
CAROLINA AS A  
SPECIALIZED  
HOSPITAL AND  
IS ACCREDITED  
BY THE JOINT  
COMMISSION.

## BRYAN FORENSICS

Bryan Forensics Services is divided into three components: Forensic Inpatient Hospital Services, Forensic Evaluation Services, and Not Guilty by Reason of Insanity (NGRI) Outreach Clinic Services.

Inpatient Hospital Services comprises Pretrial Services: inpatient psychiatric treatment, primarily for adult criminal defendants awaiting trial in SC detention centers; and the Psychiatric Rehabilitation Program: inpatient psychiatric treat-

ment services for adult criminal defendants judged NGRI or incompetent to stand trial and unlikely to become capable in the foreseeable future.

Forensic Evaluation services include court-ordered evaluations, competency to stand trial evaluations for adults and juveniles, criminal responsibility evaluations for adults and juveniles, expert witness testimony, and more.

The NGRI Outreach Clinic works with NGRI clients in

the community to ensure compliance with the Circuit Court's conditions for discharge, providing targeted case management, service plan development, group treatment, drug and alcohol screening, placement consultation, crisis intervention, and more.

Forensics patients are primarily referred by jails and criminal courts from across the state and are housed separately from patients in the Adult Services Division in a secured area.



## RALPH RANDOLPH, DIRECTOR OF ADULT SERVICES



Ralph Randolph, Director

BECAUSE THE MAJORITY OF PATIENTS ADMITTED TO BRYAN ARE PERSISTENTLY MENTALLY ILL, EFFECTIVE COMMUNICATION WITH COMMUNITY LIAISONS IS CRITICAL.

Director of Adult Services Ralph Randolph is very proud to say that DMH has been his one and only employer since graduating from the University of Tennessee in 1974. He has seen tremendous change in the Agency during his time here. Randolph explained, “When I came in the 70s, there were more than 3,500 patients in the State Hospital, and we were just beginning to make a mark with regard to moving into the community. Community perception has changed dramatically.”

Randolph was born in South Carolina, but moved to the South Bronx of New York City at an early age. He returned to South Carolina in his youth. His first position at Bryan was as director of Ancillary Services, where he worked to establish relationships between the hospital and the agency’s community mental health centers. He later served as director of Long-Term Care and moved to his current position in 2010.

Randolph works with a large number of intermediate to long-term care patients to achieve the goal of moving the patients back into the community. Be-

cause the majority of patients admitted to Bryan are persistently mentally ill, effective communication with community liaisons is critical. It is through the hospital’s well-established relationships with the community mental health centers that patients receive the most appropriate living arrangements after being discharged.

Also key is the staff’s dedication to paying close attention to what patients are saying. “We have the ongoing voices of our patients to tell us what we are doing well and what we can improve,” said Randolph. “Leadership makes a conscious effort to listen to patient input via questionnaires, and we address low scoring areas. This has been going very well.”

One of the things Randolph values most about his job is the close-knit relationship among Bryan’s staff: “We are all dedicated to improving the lives of our patients, to supporting them and supporting one another.”

Though his job can be stressful, he finds it very rewarding. He recalls an occasion when, while shop-

ping at a local store, a former patient approached him and introduced himself and his children. The patient said to one of his sons, “This man helped Daddy tremendously when he and Mommy were having a hard time.”

Randolph’s personal philosophy makes him a good fit for his position. “I have been fortunate all my life to receive care when I was young and in need. From that came a sense of wanting to thank those people who helped me,” he said. “I will be forever grateful for the family lessons, guidance, and support ... sometimes we have to look at the little things, the little rewards to reach our goals. It’s about putting one step in front of the other and moving forward. This is true for each of us as individuals, including our patients.”

## ROBERT BREEN, MD, MEDICAL DIRECTOR

Bryan Acute Services' Medical Director Dr. Robert Breen came to the hospital more than five years ago, beginning as medical director of both

Bryan Hospital and Morris Village. A 1984 graduate of MUSC, he returned to DMH for his residency. He actually began working for the Agency more than 30 years ago, first working for community services at Camp Logan and then as a mental health specialist at William S. Hall Institute.

A native of New York City, he attended high school in the Midlands of South Carolina and discovered an aptitude for Psychology while in college. During graduation advisement at USC he was told that medical school might be a good fit for his abilities, and his experience providing medical care at Camp Logan convinced him to pursue Psychiatry. He attributes his desire to practice medicine, Psychiatry in particular, to a genuine need to help care for others. "My profession satisfies that part of my personality. Psychiatry is where I can most make a difference, particularly in the public sector," he said. "I have a sense of commitment to looking after other people more

than my personal bottom line. We need folks committed to careers in the public sector, particularly during these difficult economic times."

Breen thinks Bryan's staff is undoubtedly a credit to the public sector, stating that quality goes back years, to its other facilities as well. "You run into people from across the state who are able to tell you stories about how we've saved people's lives, because we can do things that are not driven by pursuit of a private sector bottom line. That's why I find it so rewarding to work at DMH."

Staying current with literature and research is very important to Dr. Breen. As such, he would like to see DMH have more involvement with the state's academic institutions. "It would be wonderful. It's been difficult over these last few years, during this recession, to retain some of the public-academic bonds we have, but I think they reinforce each other. I wish we could do more of this," he said.

Upon completion of his residency, Breen was hired as assistant director of the Public Psychiatry Training

Program (PPTP), a collaborative of DMH and the University of South Carolina, which provides training and education to patients, families, and mental health professionals. He later became director of PPTP, where he is responsible for the Public Psychiatry portion of the training for all residents graduating from the Palmetto-USC Psychiatry residency program. As an extension, Breen is also involved in training medical students, Social Work and Psychology interns, nursing students, and DMH case managers. He has even done first responder training in the community and provides training for community care home operators, explaining that he finds this personally and intellectually rewarding.

Breen has seen changing trends in the management of psychiatric illnesses. "Here at Bryan, we've incorporated a recovery oriented approach into our treatment to do more than just symptom reduction," he said. "For patients, this means being more functional and being able to live more satisfying lives."



Robert Breen, MD,  
Medical Director

"HERE AT BRYAN, WE'VE INCORPORATED A RECOVERY ORIENTED APPROACH INTO OUR TREATMENT TO DO MORE THAN JUST SYMPTOM REDUCTION."

**DR. BREEN**

## JEANNE FELDER, DIRECTOR OF NURSING



Jeanne Felder,  
Director of Nursing

“I WANT TO  
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FELDER

Director of Nursing Jeanne Felder has been with DMH for more than six years and in her current position for more than three years. Felder knew she wanted to be a nurse growing up; her mother was a nurse and an inspiration to her, leading the Union native to complete her undergraduate and master's degrees at the University of South Carolina. She came to the Agency with extensive nursing experience, having been a Registered Nurse for 35 years. In fact, her first job after completing nursing school was at DMH's Crafts-Farrow State Hospital.

When Felder came to Bryan in 2006, she was not very familiar with the facility, but she was moved by what she saw during a tour prior to beginning employment. When given the opportunity to choose the lodge she would work on, she intentionally chose the one she felt would be most challenging, serving as nurse manager of the Geriatric Unit.

“The geriatric population is very near and dear to my heart,” said Felder. “When I looked at the unit at the time, I immediately saw some changes I wanted to make to make life better for those patients.”

Felder’s typical day begins with “morning report,” a summary from each nurse manager of what has occurred over the past 24 hours. “Everything we do is data driven, and data dictates the day,” she said. “I’m responsible for day-to-day operations from a nursing perspective, and for ensuring that patients are being treated with dignity and respect, and receiving the highest quality of care,” Felder explained.

“The Joint Commission visited Bryan in December 2009. It was very complimentary of the care given and of the staff. The survey was a collaborative effort on the part of the surveyors and employees,” Felder explained. “As we strive to

provide quality care, we conduct mock surveys to promote a continuous survey ready state.” With unlimited funding, Felder would fill all licensed nursing vacancies and ensure nursing salaries were competitive; use funds to retain loyal, dedicated, competent staff; invest in increased technology with regard to nursing (e.g. laptops for the medication room, to provide access to medical records, files, and to implement the EMR); and equip lodges with automated dispensing cabinets, which track daily use of medications and controlled substances.

Felder has always wanted to be in healthcare. “I’m a giver; I want to make sure the patients are getting the very best care, which they deserve,” she said. “I have to make difficult decisions every day, but that’s my responsibility. I must do what is necessary to improve patients’ lives.”

## BEVERLY DILL, CLINICAL COUNSELOR

Beverly Dill, a clinical counselor in the Admissions and Acute Care Unit, came to Bryan after completing her master's degree in Social Work at the University of South Carolina. She worked in an outpatient setting at

DMH for a period of time, but found that she preferred working in an inpatient setting.

Dill, a native of Connecticut, came to South Carolina in 1992. In searching for

appropriate services for her daughter, who has special needs, she found information about BabyNet, which prompted her to move here. “If you could see my child today, I’m so proud of her.

(CONTINUED ON PAGE 7)

## BEVERLY DILL, CLINICAL COUNSELOR (CONTINUED FROM PAGE 6)

The services she received in South Carolina were great," she said. Dill's subsequent involvement with a related local parent-to-parent group led her to take on the role of a "support parent" in a grant project between DHEC and DDSN. Eventually she managed the ABC Block Grant for children with disabilities and special needs.

As a clinical counselor, Dill facilitates several groups, including Rational Behavior Therapy, Relapse Control, Coping, and Current Events. "I like what I do very much," she said. "What's so fascinating is when, at the end of a long day, that patient gets ready to walk out the door, they

say to me and my coworkers, 'Thank you, I feel that you've helped me, and I think I can go out and do this.' It's very rewarding to hear that."

According to Dill, the best part of her job is facilitating groups. "I just love it when patients are able to open up, because a lot of them arrive with a lot of issues that others don't understand. They face stigma and shame. When they come to us, they feel they are in an environment where they can discuss things, that there are people there with similar issues. They come because they know that they can get help. We give them the tools and

the information they need to recover," she explained.

Dill's personal and professional motivation is to "do my job well and have fun. Keep a positive attitude." Her can-do attitude and determination has helped her in many ways. In fact, despite receiving a diagnosis of breast cancer while in graduate school, Dill continued on the path to her goal and completed her master's degree. "You set the tone for the day," she said. "You carry your positive attitude to the work environment, and you can spread that to your coworkers and to your patients. Positivity affects everything."



Beverly Dill,  
Clinical Counselor

## JUDGE MARVIN LAWSON, DARLINGTON COUNTY PROBATE COURT

Darlington County Probate Court Judge Marvin I. Lawson comes to Bryan Hospital each week to hold mental release hearings for as many as 24 counties. The Darlington native has served as probate judge for more than 17 years. Judge Lawson previously served as Clerk of Court for 13 years and thought that would be where he remained. But he found serving as Probate Judge to be a wonderful change. "It's more satisfying in a way, because I feel like I accomplish something on my own," he said.

Judge Lawson's impression of Bryan is that, "They work with people from across the spectrum from treatment to recovery. This is a huge responsibility for the hospital, and the staff do a great job." Lawson is very pleased with his experience at the hospital, noting that the Judicial Processing Department is efficient. Patients and doctors are ready when he arrives each week. All staff are very efficient with regard to the use of his time.

Lawson doesn't think South Carolina invests enough in Mental Health, but thinks

the State is doing the best it can, given the economic climate. He also feels that the public lacks understanding of the Probate process and how to find treatment for loved ones. When requested, he speaks to civic groups to educate the community about the process.

"The doctors here are far and above the norm of what I see," said Lawson. "We are very fortunate to have these doctors and staff at Bryan. I appreciate what they do, and I've had no problems with the hospital at all."



Judge Marvin Lawson,  
Darlington County  
Probate Court

## HARVEY MILLER, DIRECTOR OF FORENSIC SERVICES



Harvey Miller, Director of Forensic Services

“THE PUBLIC SECTOR HAS NOT ONLY A LEGAL, BUT A MORAL RESPONSIBILITY TO CARE FOR THOSE WHO CANNOT CARE FOR THEMSELVES.”

MILLER

Director of Forensic Services Harvey Miller has been in his current position since 2010. Previously, he served as program director of Bryan's Acute program and also as acting deputy director for the DMH Division of Inpatient Services.

Miller, who earned his bachelor's degree from Hofstra University and his master's degree in Social Work from Adelphi University, first worked in the mental health field as a social worker at a state hospital in New York. After further graduate work at the University of Maryland and many years as an assistant professor at Adelphi, he felt the need to get back into the field, as he enjoyed doing operational work in a hospital rather than academic setting. He began to apply for positions in South Carolina, having visited the area many times and liking it, and has been with DMH for more than four years.

Miller feels the community at large does not understand the scope of Forensics in Psychiatry. “In many ways, Forensics is more complicated than inpatient and outpatient mental health programs,” said Miller. “The complications come from having to bal-

ance the safety and needs of the public with the rights of the patients. It is a very strong and increasingly complicated balancing act.” He feels that DMH does an incredibly good job at achieving this balance, both protecting the public and treating patients who need to be treated.

With regard to Forensics services nationwide, Miller feels that the need for services will increase. “The fascinating thing about Forensics is that it sits at the cusp of the criminal justice and mental health systems. Forensics has been a national growth field, and it appears that it will continue to grow,” he explained.

In addition to his work as director of Forensics, Miller has played a key role in the Agency's long-term planning effort, leading a sub-committee. “We recognize that health care, particularly mental health care is changing, and we've just begun to scratch the surface of these changes. We need to be proactive and prepare for coming changes,” he said. To that end, the sub-committee looked at legislative trends, pulling nationwide data and information and working

with other committees to develop a plan to give DMH guidance and to serve as a living, dynamic document.

When asked about the future of public mental health, Miller said, “I think the scope will drastically change; greater care will be required to take care of the uninsured. Public mental health has an important function in guiding services. Planning, administration, and identifying suitable service providers will be more and more important to public mental health. I think unless something drastic changes, the public mental health system will always be responsible for intermediate and long-term care of patients.”

Miller feels that, “The public sector has not only a legal, but a moral responsibility to care for those who cannot care for themselves. I believe that working in the public sector means that you have to be smart, diligent, and caring; it goes with the territory and makes it possible to provide the best services possible despite resources that are stretched thin.”

## PEGGY WADMAN, MD, FORENSICS MEDICAL DIRECTOR

Forensics Medical Director Dr. Peggy Wadman has worked at DMH for nearly five years, previously serving at clinics of its Beckman Center for Mental Health Services. Though she hails from Oregon, Wadman's military family lived all over the world during her youth. Wadman completed her undergraduate

degree in journalism at the University of South Carolina, and worked as a journalist for a number of years, which she really enjoyed. After losing her mother to breast cancer, however, she began to think about continuing her education in medical school. She completed her Doctor of Medicine as well as a master's degree in Public Health at the University of South Carolina.

Though Journalism and Medicine appear to be completely different careers, Wadman explains that, "Psychiatry, like Journalism, is all about getting the story, who, what, when, where, how, and why. When you write reports, complete evaluations, and go to court, you are really telling someone's story."

According to Wadman, "There is no normal day in Forensics, because there are two different pro-

grams. There is always something going on." On a given day she deals with legal issues, attends hearings, attends to medical concerns, and addresses adverse incidents. She says, "The only regular part of the day is that it starts with morning report at 8:30 a.m."

"I like the diversity of my job," said Wadman. "I really enjoy being with the medical staff and listening to them. The best ideas for solving challenges come from people who work most closely with the situations." As a result, every Wednesday morning she meets with psychiatrists and nurse practitioners to identify problems, brainstorm, and develop solutions.

With regard to the current state of public mental health in South Carolina, Wadman said, "I think that South Carolina has done really well with regard to the care of the mentally ill, and slowly, over time, that's being dismantled, and I think that's tragic. I feel that jails could become the new mental health systems. The state is not doing itself favors by cutting back on mental health centers and beds in mental health hospitals, because

we are going to pay for it in other ways. More crime, more costs for jails and prisons, the mentally ill will still be with us, but will be managed in different locations. I think it's more humane to have a quality, solid mental healthcare system."

In addition to her duties in Forensics, Wadman recently took part in the Agency's Executive Leadership program. She feels it is of great value, explaining, "It is valuable to learn about the bigger system, to avoid being myopic and to understand system-wide issues." She also feels the program helps professionals tailor solutions to specific areas and problems.

Wadman describes her motivation for her work as growing from her lifelong desire for fairness: "I was always for the underdog, I abhorred bullies, stood up for the little guy. Also, I moved so much growing up. Because I was always the new kid at the school, I got used to hanging back and observing the hierarchies and interactions among others. I tended to gravitate to the outsiders, and I think this is probably why I went to public mental health."



Peggy Wadman, MD,  
Forensics Medical Director

"I THINK IT'S  
MORE HUMANE  
TO HAVE A  
QUALITY, SOLID  
MENTAL  
HEALTHCARE  
SYSTEM."

**DR. WADMAN**

## JEFF MUSICK, PHD, CHIEF OF PSYCHOLOGY AND DIRECTOR OF FORENSIC EVALUATION SERVICES



Jeff Musick, PhD,  
Chief of Psychology and  
Director of Forensic Evaluation  
Services

“THE PEOPLE  
WHO WE SERVE  
ARE GETTING  
GOOD QUALITY  
TREATMENT.  
WE HAVE  
HIGHLY  
CREDENTIALED  
STAFF.”

**MUSICK**

Jeff Musick, chief of Psychology and director of Forensic Evaluation Services (FES), has been with DMH for nearly 12 years. He began his career with the Agency as a chief psychologist, was promoted to director of Psychology in Forensics, served as clinical director of FES, and is now director of FES, supervising both the clinical and administrative staff. An Ohio native, Musick completed his undergraduate degree at Miami University (Ohio) and his Ph.D. in Clinical Psychology at the University of Florida.

FES does three things: conduct court ordered evaluations, provide expert testimony in the Court of General Sessions and family courts, and process related paperwork. There are several types of evaluations, including, but not limited to, competency to stand trial (adults and juveniles), crimi-

nal responsibility (adults and juveniles), Social Security/Disability evaluations for forensics patients (to determine benefit qualifications), and diagnostic consultations. FES staff frequently testify about evaluations, having made 64 court appearances last year alone.

Musick's typical day comprises addressing coverage issues, performing evaluations, and reviewing reports. He performs both clinical and managerial duties, supervising 18 full time staff, half of whom are clinicians, four social workers, two paralegals, and two administrative employees. “We have a very high functioning staff, and I feel very lucky that that's the case,” he said. “The staff at the Forensic hospital, particularly the Psychiatry staff, is better than it's ever been as far as I can see.”

Musick credits an “overdeveloped sense of fairness” for his ability to serve as both a clinician and an administrator: “It helps me in my work, in terms of my objectivity, to see all sides of cases, consider all variables, and I think it helps me in my supervisory responsibilities, too.”

The Department, despite the financial difficulties it faces, has been able to put quality clinicians in place, according to Musick. “It's quite an impressive accomplishment. The people who we serve are getting good quality treatment. We have highly credentialed staff.” He is proud to work at the DMH and does not plan to leave anytime soon, saying, “I'm proud to work in the public sector. It's rewarding to serve people who would otherwise be underserved. I think I'm in the right place.”

## BILL DAVIS, PROGRAM MANAGER

Bill Davis, program manager of the Forensic Not Guilty by Reason of Insanity (NGRI) Outreach Clinic, has worked at DMH for nearly 12 years. The Abbeville native completed his undergraduate work at the University of South Carolina, and his master's degree at Furman University.

Davis wrote a proposal to start the NGRI Outreach Clinic in 1999, and was hired to implement it in 2000. Since its inception, he has seen a great deal of change. “Though it began as more of a public safety program, we very soon saw it would be better to work on behalf of clients to help them comply with court

orders. Once we changed that perspective, clients began calling on staff for assistance with issues that may have kept them from meeting their court orders before,” he explained.

On a typical day, Davis works with Sheriff's Depart-

**(CONTINUED ON PAGE 11)**

## BILL DAVIS, PROGRAM MANAGER

(CONTINUED FROM PAGE 10)

ments, addresses medication issues, and speaks with clients. NGRI outreach staff also serve as liaisons between clients and mental health centers and law enforcement. There is no such thing as a “dull day” in NGRI Outreach, however. Davis recalled an incident where he received a call about a client in a standoff situation. SLED contacted Davis, who traveled to the location in Bamberg. The client, who

was very distrustful of law enforcement, refused to talk to anyone but Davis, who spoke with him by cell phone until he arrived at the scene. The client came out, and Davis rode with him to the hospital. Not only did he assist with ensuring the safety of the client, but also built a close relationship with SLED and local law enforcement. “These clients need the respect that we want. Giving them this re-

spect is key to getting them to work with us,” Davis explained.

In addition to his work for Bryan Forensics, Davis is also a well-known painter, who has an annual show every fall. His work is often featured in Midlands and Lowcountry galleries, and collectors from as far away as Europe seek out and purchase his pieces.



Bill Davis, Program Manager

## KIM GRANT, ACTIVITY THERAPIST SUPERVISOR

Activity Therapist Supervisor Kim Grant began work with DMH 33 years ago, and came to Forensics in 2002. During her career she worked in many areas of the former South Carolina State Hospital. Though she originally wanted to be a teacher, it became apparent to Grant early in her college career that she wanted to work with special populations. As a result, she changed her major at the University of Georgia to Therapeutic Recreation, and completed her degree in 1979. She then came to DMH through an internship.

Grant’s typical day begins with morning report, meeting with activity therapists, reviewing calendars of activities, and making plans to fill in where needed. Though an administrator,

she is on the units every day.

“There’s always a fire to put out. I stay busy on the units. But the patients know me, and I’m a go-to person there,” she explained. Her favorite part of her job is having the flexibility to create different activities for patients; coming up with new ideas is critical for long-term patients. As a result, she is continuously brainstorming and developing new ideas. “Our patients are no different from you or me. They look forward to activities, special events, things that make their days special. Being a part of that is a big highlight for me,” she said.

Also important is creating a consistent environment. “Consistency is the key to success,” said Grant. “It’s picked up on by the

patients and it’s appreciated; they yearn for consistency. They are already troubled and sometimes unstable. If they get consistency from staff on a daily basis, they can improve.”

When asked what she would do with unlimited funds, Grant doesn’t hesitate – she has plenty of ideas. “I would build a new facility with a secure outdoor area, one to two person bedrooms, personal storage space, a dining room to eat meals and socialize, a more homelike location. I’ve envisioned this for years.” Grant loves her job and doesn’t intend to leave anytime soon - she has a lot of good years and good ideas left. “Every day I get up and want to go to work. As long as I have that feeling, I know this is where I belong,” she said.



Kim Grant,  
Activity Therapist Supervisor



TO SUPPORT THE RECOVERY OF  
PEOPLE WITH MENTAL ILLNESSES.

**SC DEPARTMENT OF  
MENTAL HEALTH**

2414 Bull Street  
Columbia, South Carolina 29202  
Phone: (803) 898 - 8581

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**G. WERBER BRYAN  
PSYCHIATRIC HOSPITAL**

220 FAISON DRIVE  
COLUMBIA, SC 29203

803-935-7140 (CIVIL)  
803-935-5809 (FORENSIC)

**RECOVERY SPOTLIGHT – BY BONNIE F.**

Hi, my name is Bonnie and I work at Bryan as the Consumer Affairs Coordinator (CAC). My journey through the world of mental illness began when I was about 30 years old; I was diagnosed with depression, Obsessive Compulsive Disorder (OCD), and anxiety.

For me, depression was a big black hole inside of me that just couldn't be filled. For a long time, I felt empty on the inside no matter what was going on around me. I didn't laugh and I didn't cry. There were no "feelings" in my life. Obsessive Compulsive Disorder was the

world of fantasy that I lived in. If things in my life couldn't be "perfect," I just lived out a perfect life in my mind.

I have had several hospitalizations, beginning when I was about 30. During my hospitalizations and therapy I've learned many coping skills. Some of these include living in the moment, the importance of taking my medicine, and learning not to judge myself and others so harshly. My hospitalizations, medication, coping skills, weekly therapy, family support, and (dear) friends have helped me to

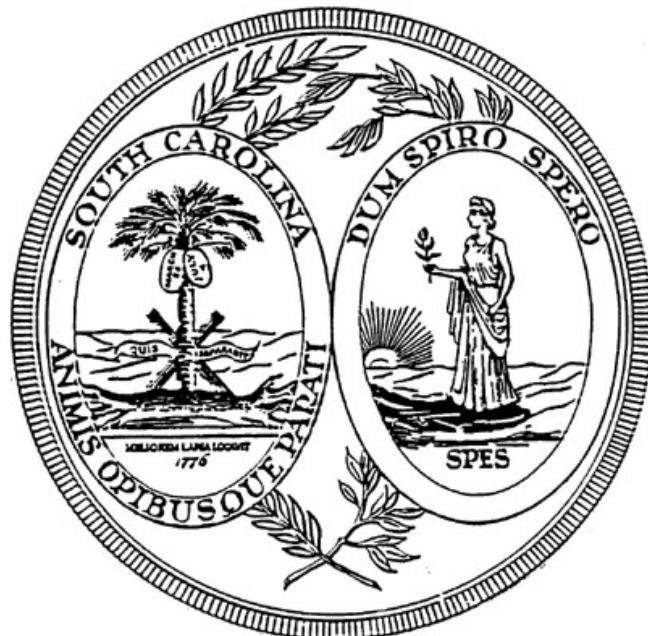
move through this journey called mental illness.

Since I have been on this road to recovery from mental illness, I have been able to keep a full time job. I have had many jobs, but the job I have right now allows me to help other folks with their journeys down the road to recovery from mental illness. As the CAC for Bryan, I also work with a group of patients who meet monthly to discuss the needs of the patients; this report goes to Senior Management. We all work together to help the patients get their needs met while they are at Bryan.

My recovery isn't over yet. I look forward to many good times and adventures ahead of me. I wouldn't be true to myself if I didn't admit that there will be some hard roads ahead also. But the most important thing this journey of recovery has taught me is I am a somebody, not a nobody.



Bonnie F.



**SOUTH CAROLINA DEPARTMENT OF MENTAL HEALTH**  
**State Director John H. Magill**

**DIVISION OF INPATIENT SERVICES**  
**MORRIS VILLAGE ALCOHOL AND DRUG**  
**ADDICTION TREATMENT CENTER**  
**Director George McConnell**

**Fall 2011**



## MORRIS VILLAGE ALCOHOL AND DRUG ADDICTION TREATMENT CENTER

610 Faison Drive  
Columbia, SC 29203  
(803) 935-7100

### MORRIS VILLAGE ALCOHOL AND DRUG ADDICTION TREATMENT CENTER

The Morris Village Alcohol & Drug Addiction Treatment Center (MV) is the inpatient addiction treatment facility of DMH. The mission of MV is to provide effective treatment of chemical dependence through comprehensive evaluation, crisis stabilization, safe detoxification, and state-of-the-art treatment services.

MV has helped approximately 44,300 South Carolina residents since opening its doors in October 1975. The facility was designed based on the Therapeutic Community Model, which emphasizes the therapeutic power of groups. 14 cottages surround centrally located community functions such as the barber shop, library, and canteen.

Services include medical care, group therapy, activity therapy, family education and therapy, preparation for Alcoholics Anonymous (AA) and Narcotics Anonymous (NA), relapse prevention planning, and case management.

A typical day for patients includes community meetings, addiction education, group therapy, recovery dynamics, AA Big Book study, activity therapy, and AA and NA meetings. Chaplains conduct non-denominational worship services on Sundays.

During fiscal year 2011, MV admitted 1,708 people and provided 40,710 bed days. The average length of stay was 24 days.

#### Admissions

The primary patient referral sources to MV include hospitals, the probate court system, and the local county alcohol and drug abuse centers. MV accepts three types of admissions: voluntary, judicial (by order of a probate court), and emergency (by examination and affidavit of a licensed physician).

To qualify for admission, an individual must be at least 18 years of age, a resident of South Carolina, meet diagnostic criteria for substance dependence as defined by the *Diagnostic and Statistical*

*Manual of Mental Disorders, Fourth Edition*, and be appropriate for admission according to the American Society of Addiction Medicine criteria. Special programs are available for women and for individuals with a dual diagnosis.

#### Accreditation

All DMH facilities are licensed and/or accredited. MV is a specialized hospital, licensed by the South Carolina Department of Health and Environmental Control, and is accredited by the Commission on Accreditation of Rehabilitation Facilities (CARF) since 1992.

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## GEORGE McCONNELL, DIRECTOR



George McConnell, Director

Dealing with substance abuse, alcoholism, or drug addiction is never easy. It's even more difficult when one is also struggling with mental health problems. However, MV presents a coordinated approach to deal with these often co-occurring illnesses. As Director George McConnell puts it, "Morris Village individualizes patient care, eliminates fear, and gets people who are often committed here against their will to realize they are in a good place."

McConnell, a Charlotte, NC, native, has been the director of MV for five years. His educational background includes a Sociology Degree from Belmont Abbey College and a master's degree in Divinity from Duke University. His past employment includes serving as director of Daymark Recovery Services-Union Center, director of Constituent's Services at the Department of Alcohol and other Drug Abuse Services, and at Keystone Substance Abuse Services in Rock Hill, SC, where he served 15 years as a counselor and treatment coordinator and later became

deputy director.

At MV, patients can relax and feel safe in their treatment as they are among others who often are experiencing the same feelings and fears. There is an emphasis on individualized treatment that meets patients' specific, unique needs. "I have a passion to make sure that we are not offering 'cookie cutter' treatment," said McConnell.

McConnell feels that one of the biggest challenges to successful treatment at MV is reconnecting people to the community. "If there is a gap between discharge and follow-up appointments with outpatient providers, much of our good work can be undone. It's a real challenge to make sure continuity of care is achieved."

McConnell is especially proud of two of MV's innovative programs, the Women's Treatment Program and the Co-occurring Program. "Morris Village has been doing gender-based treatment for longer than any other treatment facility I know of. Our Women's Program is an

amazing program tailored to the special needs of women; its success is evidenced by our waiting list, and we have a treatment approach with excellent outcomes."

The Co-occurring Program also continues to grow to meet the individualized needs of MV patients with co-occurring substance abuse disorders and mental illness. McConnell notes that trying to deal with two illnesses presents significant challenges. "We're looking at how to prepare patients to have a better quality of life and to reduce harm to themselves, to lessen their hospital visits, and to hopefully impact their penetration of the judicial system," he said.

McConnell continues to challenge both his staff and himself. "I'm still excited about coming to work and want to continue to motivate staff to do the best job possible during these tight budget years. It's crucial for us to deal with and eliminate patient fears and make people understand they can recover from these illnesses and addictions and turn their lives around."

AT  
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ON  
INDIVIDUALIZED  
TREATMENT  
THAT MEETS A  
PATIENT'S  
SPECIFIC  
UNIQUE NEEDS.

## DR. TREY CAUSEY, MEDICAL DIRECTOR

Trey Causey, M.D., a Georgia native, has been employed with MV as medical director since 2007. He graduated from Georgia Tech and the Mercer University School of Medicine, and completed his general psychiatric residency at the University of South Carolina and an addictions residency at the University of Colorado. Prior to coming to

MV, he was the interim medical director at the University of Colorado.

Dr. Causey likes to stay busy. In addition to his role as medical director, he has participated in the DMH Executive Leadership Training Program, works with medical students at USC, and is involved with research projects.

He also lectures Child, Adolescent, and Geriatric residents and is a staff member of the USC Professional Wellness Program.

When asked how he came to enter the field of addictions medicine, Causey recalls, "I always had an interest in the brain and the workings of the brain. I initially thought

## DR. TREY CAUSEY, MEDICAL DIRECTOR (CONTINUED FROM PAGE 4)

about going into Medicine because of experiences with hospitals when I was younger and have always found addictions interesting. It is very rewarding when you see dramatic turnarounds after treatment in people who were formerly heavily addicted."

MV uses a multi-disciplinary approach to drug addiction, alcoholism rehabilitation, and mental illness with its team of treatment professionals. These include licensed and certified counselors, psychiatrists, and nurse practitioners. They guide each resident through a thorough diagnostic process, individualized addiction treatment, and aftercare. "I think that being part of DMH, which as an integrated system combines psychiatric treatment and addiction treat-

ment, allows Morris Village to offer a unique treatment approach," he said.

While Dr. Causey sees MV providing effective treatment, he would like to see additional staffing to lower the counselor to patient ratio and have enough psychiatrists so that every patient who is admitted can have a psychiatric evaluation.

Dr. Causey feels it is an exciting time to be working in the Addictions field. New tools and treatments have been shown to be effective in treating addictions. He would like to see MV provide additional services to other populations. "It's tempting to think MV could become flexible enough to generate more revenue and provide services such as a pregnant women's addictions

treatment program. A mother and baby program would be ideal. There are not a whole lot of states that have these programs, but those that do find them to be of great benefit."

Dr. Causey said, "Addictions treatment does work and there is plenty of evidence that confirms this. It works when we provide good treatment and treat addiction like what it is, a chronic disease. It works when you treat it like it's diabetes or hypertension. It doesn't work if you think it's like treating the flu. You need a continuum of services that work together and treat the problems that present at each level. It must be a holistic approach, and often you can't expect instant one-time success."



Dr. Trey Causey,  
Medical Director

## PAM WILSON, PROGRAM MANAGER OF REHABILITATION SERVICES

Pam Wilson, an employee of MV since 1990, is the Program Manager of Rehabilitation Services. Her past roles and responsibilities have included working in the Adolescent program as an addictions specialist and in the Women's program, where she later became the program manager. A Bishopville native, Wilson graduated from the University of Georgia with a bachelor of Business Administration degree in Marketing and Management and from the University of South Carolina with an Education Specialist degree in Guidance and Counseling.

Wilson believes that one of

the strengths of MV is the integrated care that is a cornerstone of the treatment regime. "Our philosophy is to take a 'no wrong door' approach, where patients can be treated for both co-occurring problems," said Wilson.

Wilson would like for MV to continue implementation of evidence-based best practices. She is a strong proponent of trauma assessment and trauma-focused Cognitive Behavioral Therapy.

She believes the Women's Program at MV is the facility's marquee program. According to the National Insti-

tute on Drug Abuse, women become addicted to drugs more quickly than men. To respond to this and other addiction issues specific to women, MV has set up more than 30 beds in this specialty unit.

Wilson encourages anyone who struggles with addiction and/or substance abuse to seek treatment.

Wilson says she is blessed to work at DMH and MV. "It's the best place I have ever worked and I don't want to work anywhere else. We work closely as a team here and the bottom line is we all want our patients to recover."



Pam Wilson,  
Program Manager of  
Rehabilitation Services



Tammy Cleveland,  
Nurse Program Manager

THE MV  
NURSING TEAM  
HELPS PATIENTS  
TO FIND A  
LIGHT OF HOPE  
WHEN LIFE FOR  
MANY HAS BEEN  
SO DARK FOR  
SO LONG.

## TAMMY CLEVELAND, NURSE PROGRAM MANAGER

Nursing Program Manager Tammy Cleveland, a Dallas, Texas native has been employed at MV for five years. Her educational background includes graduation from Bishop College with a bachelor's degree in Biology, a Nursing degree from Baptist University, and an MBA from Amber University. She previously worked for three years at Bryan Psychiatric Hospital and at the SC Department of Health and Environmental Control as a home health unit manager.

The MV nursing team helps patients to find a light of hope when life for many has been so dark for so long. The team works diligently to find treatment that will be successful for patients and at enhancing staff's education in

Addictions by serving on community boards and task forces, and doing research.

Cleveland spends a large part of each day working directly on the units, and nothing surprises her. She has seen addiction up close outside of MV. "I had a friend that was on crack, and seeing what his mother went through, I couldn't understand why he just didn't go to a treatment center and get help. When I came to Morris Village, I learned about the brain, about recovery and about addiction. I got a lot of insight about what has to happen to recover."

Cleveland feels that substance abuse nurses must be compassionate and personalize treatment by getting to

know each patient. Cleveland encourages all MV staff to work to the best of their ability to meet the individualized needs of the patients.

In the next five years, Cleveland would like to see MV create a Senior Unit Program and additional revenue made available to increase employee salaries.

According to Cleveland, "A good day consists of being fully staffed, with everyone staying on top of their responsibilities. A bad day consists of not having enough staff coverage to ensure the safety needs of both the patients and employees. God has given all of us talents, not to just hold on to but to share with others."



Lawrence McClintock,  
Human Service Coordinator I,  
Dual Diagnosis Severe  
Co-Occurring Program Counselor

## LAWRENCE MCCLINTOCK, HUMAN SERVICE COORDINATOR I

Lawrence McClintock is a Dual Diagnosis Severe Co-Occurring Program counselor at MV. Born in Laurens, he is a graduate of both South Carolina State University, with a bachelor's degree in Sociology and Social Work, and of Clemson University with a master's in Community Counseling and Guidance. Previously, he worked with the Council on Aging and at the Columbia Area Mental Health Center.

Since he first started working with the MV Dual Diagnosis Program in 2006, acute dual diagnosis patients have been integrated into the main population, which poses

many challenges.

Once patients leave MV, regular participation in outpatient treatment needs to occur. Because substance abuse is a chronic, relapsing disorder, treatment may take months, years, or a lifetime. "The benefit of being a part of the DMH system is that occasionally patients need to be sent to Bryan Psychiatric Hospital because we need to stabilize them. Once they are redirected, we can usually still work with them. It can be a challenge for us to treat them when they first come in but it's very rewarding as you see them get better everyday," McClintock said.

McClintock has found MV to be generally very successful in finding safe, affordable housing placements throughout South Carolina. "There are certain counties that are a lot easier than others. The best area for resources and dealing with placements is the Greenville/Spartanburg area. Columbia, however, can be tough."

McClintock said, "I believe people can get well and recover. I believe in persistence, perseverance, and never giving up. That's what I tell patients. I've seen great things happen in life when people persevere in spite of difficult times."

## KAITLIN BLANCO-SILVA, WOMEN'S PROGRAM COUNSELOR

Counselor Kaitlin Blanco-Silva has been employed with the MV Women's Program for more than a year. "College is when I became interested in women's issues and working with women. I volunteered at Safe Harbor Women's Shelter in Greenville." She went on to say, "I find women's struggles and what they have been through very inspirational. I'm so lucky to work with survivors. Women just really have it tough sometimes."

Silva, a Greenville native, received her master's degree from the University of South Carolina School of Social

Work and her undergraduate degree from Erskine College. She interned with the Lexington-Richland County Alcohol and Drug Addiction Commission's Recovery Professional Program, and later worked at the Piedmont Mental Health Center in the WRAPS Program.

Silva, who specializes in dual diagnosis and relapse prevention groups, said, "MV gives patients the tools to deal with things in a different way about their drug use, about their world, about things in the past and how to deal with the future." The impact of addiction is significant on women.

Statistics show women have a higher risk than men for certain serious medical consequences of alcohol use, including liver, brain and heart damage. MV provides a safe environment for women dealing with alcohol and/or substance abuse. "They come here with stuff on their chest. If they allow us, and if they are at that place, we really can start to change their mode of thinking and change their perspective," said Silva. She instills in her patients that experiences at MV are relatable to bigger experiences out in the world.



Kaitlin Blanco-Silva,  
Women's Program Counselor

## LOUISE HAYNES, MUSC/NIDA

A former director of MV, Florida native Louise Haynes now partners with MV in several research activities. She works for the Medical University of South Carolina (MUSC) as an assistant adjunct professor in the Department of Psychiatry and is the Community Treatment Program Representative liaison for all research projects with the National Institute of Drug Abuse (NIDA) Clinical Trials Network. She is a graduate of the University of Florida and San Jose State University—California and has a master's degree in Social Work.

Haynes has worked at the Charleston, SC, Veterans Administration Hospital for six years in both inpatient and outpatient psychiatry/addictions treatment units. "I really learned about substance abuse there" said Haynes. Under the leadership of Jerry

McCord, Director of the SC Commission of Alcohol and Drug Abuse, she served as a treatment consultant helping the local 301 system prepare for Medicaid contracts through diagnosing substance abuse, and psychiatric disorders and providing guideline contracts for Medicaid compliance. Later, she became the director of Women Services for the Agency.

Her involvement with DMH began as the director of MV, a position she held for six years. During this time, she began an affiliation with MUSC and the NIDA Clinical trials network by conducting research projects at the facility. Following reorganization in DMH, Haynes decided to work full time with MUSC and collaborate with MV.

MUSC's Department of Psychiatry has one of the most

robust research platforms of any university in the Southeast, and an ongoing contract with MV as a research site and as part of a national network of randomized clinical trials. There is a lot of interest in integrating substance abuse into healthcare as a whole rather than as a stand-alone, highly stigmatized disorder. "Making substance abuse have a stronger medical aspect is one of the strengths of Morris Village treatment programs. It's ahead of the curve, treating the medical problems that people have — the whole person not just their substance abuse," said Haynes.

In the clinical trials network, 200 community treatment programs across the country conduct research in Substance Abuse, with about 20 universities involved. Future participation will continue in this exciting field.



Louise Haynes,  
MUSC/NIDA

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**RECOVERY SPOTLIGHT – BY JACKIE M.**

I came to Morris Village for treatment two times, first in 1991 and then later in 2001.

In 1991, my abuse of crack cocaine negatively affected my relationships and my job performance. At that time, I was unwilling to admit that I was addicted to cocaine. I was in denial, and, unfortunately, I valued my substance use more than my relationships or my job. I didn't do the things my counselors told me to do. I didn't save those valuable recovery tools that I was given then. I went right back out and used again. My life spiraled further out of control and things got much, much worse.

In 2001, I hit rock bottom. My parenting skills and my relationship with my children had deteriorated with the chronic drug use. I was in-

vestigated by the Department of Social Services. They took my youngest child into foster services. I was pregnant at the time and my unborn baby and I both tested positive on a drug test. I begged to be allowed to come back to Morris Village for treatment. This time I knew I needed to pay attention, be honest and learn everything I could to stay clean. I wanted the pain to stop and I wanted my children back. Thank God they let me back into Morris Village!

This time, I was honest and soaked in everything I could about how to stay clean and sober. The people at Morris Village believed in me. They LOVED me back to sanity. I was beaten down and they taught me how to stand back

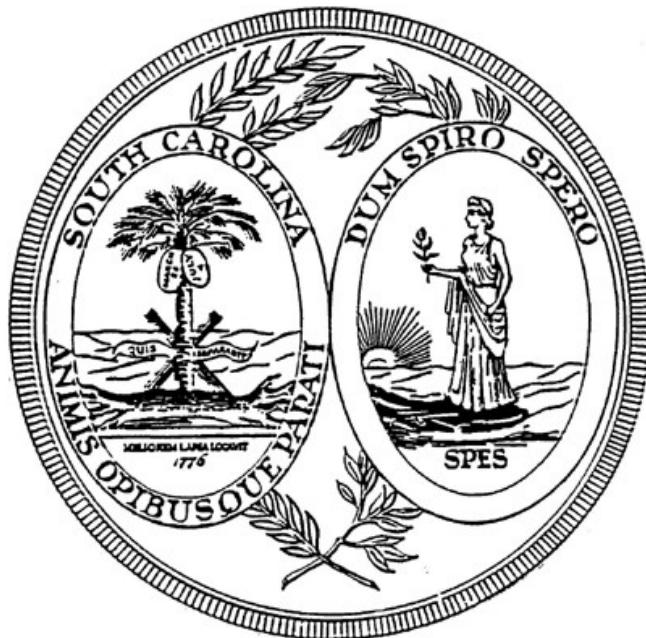
up! They believed in me at a time when I could not believe in myself.

I did what I was told, and went consistently and often to 12 Step meetings. I chose a Sponsor. I stayed away from "old playmates and playgrounds." I learned how to make better decisions and deal with my feelings without using impairing substances. To be successful in recovery, I went to step-down outpatient treatment at LRADAC, the Behavioral Health Center of the Midlands, and was drug tested weekly. I had to organize my life and stick to my daily schedule.

I am so thankful. I got my children back. The employer I had in 1991 took me back and gave me another chance. People at my job respected

me. They began to recognize that I am trustworthy. The quality of my life is so much better. I'm happy and so grateful to the staff at Morris Village and my Higher Power. My life continues to be blessed. I met my wonderful husband, who is also in recovery. We have been married now for three years. I have restored relationships with my children.

I have learned, through it all, that I am a loving, caring person and a good parent, friend, and co-worker. I recognize that I have a choice today in how I live my life. I can deal with life's chaos without picking up a drug. I am truly blessed!



**SOUTH CAROLINA DEPARTMENT OF MENTAL HEALTH**  
**STATE DIRECTOR JOHN H. MAGILL**

**RICHARD M. CAMPBELL VETERANS' NURSING HOME**  
**NURSING HOME ADMINISTRATOR JAY BLOOMER**

**Spring 2012**



**RICHARD M. CAMPBELL  
VETERANS' NURSING HOME  
4605 BELTON HIGHWAY  
ANDERSON, S. C. 29621  
(864) 261-6734**

## **RICHARD M. CAMPBELL VETERANS' NURSING HOME**

Pride. Dignity. Respect. These three words echo through any conversation with the staff at the Richard M. Campbell Veterans' Nursing Home (Campbell). Located in Anderson, in the northwestern part of South Carolina, Campbell is one of three Veterans' nursing homes operated by the DMH, along with the Veterans' Victory House in Walterboro and Stone Pavilion at Tucker Nursing Care Center in Columbia. The facility is named in honor of Sergeant Richard Michael Campbell, who was killed in action in Vietnam on May 7, 1968. The brother of former Governor Carroll A. Campbell, Jr, he was awarded the Bronze Star and the Purple Heart for his valiant service.

Time and time again, staff talk about the special feeling they have, not just for the veterans they serve, but for the rare privilege they have of being able to pay back those who gave so much in service to our country. Funded by a combination of state and federal funds, the 220-bed facility

was dedicated in 1990 to South Carolina veterans who need skilled nursing home care.

Available to any veteran who has received an other than dishonorable discharge from military service and has been a resident of South Carolina for at least one year, Campbell is operated through a partnership of public and private entities. The facility is owned by DMH, supported by funding from the State and the Veteran's Administration, and since 1998, operated by Health Management Resources Veterans Services, Inc.

Campbell offers trained specialists in a variety of health care disciplines, the latest in medical technology and equipment, full support services on-site, and convenient access to nearby amenities.

Medical care at the facility starts with a fully-licensed primary care physician as medical director. The medical director provides admittance and follow-up annual physical exams and regularly visits residents to

ensure their physical well-being. Nursing care is provided round-the-clock by a team of registered nurses, licensed practical nurses, and certified nursing assistants. The nursing services, supplemented by a full range of occupational, activity, physical, speech, and restorative therapies, are provided by trained therapists. A full time pharmacist and pharmacy technician oversee the needed medication, and the service array is completed by the social work, dietary, and transportation departments.

In addition to the quality comprehensive care, Campbell provides an environment which not only recognizes the unique needs of veterans, but is built around those needs. Many staff have formerly served in the military, come from military families, or continue to be active through the Reserves. Campbell has active involvement from veterans' organizations, including the American Legion and the Veterans of Foreign Wars, as well as other church and civic groups.

CAMPBELL  
OFFERS TRAINED  
SPECIALISTS IN A  
VARIETY OF  
HEALTH CARE  
DISCIPLINES, THE  
LATEST IN  
MEDICAL  
TECHNOLOGY  
AND  
EQUIPMENT,  
FULL SUPPORT  
SERVICES  
ON-SITE AND  
CONVENIENT  
ACCESS TO  
NEARBY  
AMENITIES.

CAMPBELL  
RECEIVES  
CERTIFICATIONS  
THROUGH AN  
ANNUAL  
CENTERS FOR  
MEDICARE &  
MEDICAID  
SERVICES (CMS)  
SURVEY AND  
ANOTHER  
CONDUCTED BY  
THE  
DEPARTMENT  
OF VETERANS'  
AFFAIRS.



William S. Biggs,  
President/CEO,  
HMR Veterans Services, Inc.

AS A VETERAN OF THE UNITED STATES ARMY, HE SEES IT NOT AS A JOB, BUT A PRIVILEGE TO PROVIDE CARE FOR "THE BEST PEOPLE IN THE WORLD."

## WILLIAM S. BIGGS, PRESIDENT/CEO, HMR VETERANS SERVICES, INC.

William S. Biggs is in the business of caring. The example set by his parents gave him the core value of caring for others.

As president of Health Management Resources Veterans Services, Inc. (HMR), and with more than two decades of health care experience and more than 15 years of serving the healthcare needs of veterans, Biggs oversees the daily operations of the HMR managed facilities, including Campbell. As a veteran of the United States Army, he sees it not as a job, but a privilege to provide care for "the best people in the world."

Originally from Illinois and educated at Southern Illinois University, he worked at various positions in health care management before becoming the first administrator of Campbell. When he first visited the

facility at the request of the late Representative Patrick B. Harris, he got the feeling that Campbell was where he needed to be. A week later he was offered the job and accepted, starting at a time when the facility had only three units open.

With Campbell as their first veterans' nursing home, he and partner Mike McBride formed HMR, which now operates veterans' nursing homes in Maryland and Alabama, as well as two DMH veterans' nursing homes in South Carolina. Key to the operation of a program like Campbell are the relationships formed with the veterans, the associated state agency, and the contractor. "If we all work together, we will all be successful," said Biggs.

A firm believer in the importance of family, Biggs

acknowledges that "Campbell has strong political support but it is the families that make it work." For him, the best part of his job is "getting out in the facilities and talking with the veterans."

Biggs is a former president of the South Carolina Health Care Association and current board member and active member of the National Association of State Veterans Homes and the National Association of State Directors of Veterans Affairs. Additionally, Biggs is involved in the American Legion and the Coastal Carolina University Board of Trustees.

When asked to sum up his philosophy, he quoted John F. Kennedy, "Ask not what your country can do for you, but what you can do for your country." Clearly, Biggs has found what he can do.



Loretta Telley,  
CNA Team Leader

## LORETTA TELLEY, C.N.A TEAM LEADER

"I love my job. And I would love to retire here." For Loretta Telley, Certified Nursing Assistant (CNA) team leader, that just about sums it up. "I love the veterans; some days, if I'm feeling down, I talk with the vets and they brighten my day," she said.

As the CNA Team Leader, Telley takes the pressure

off the nurses and monitors the CNAs to make sure they are doing what they need to do and that everyone's personal needs are taken care of. Starting out in housekeeping, she took the CNA class, and in her second year as a CNA, was named CNA of the Year at Campbell. In her 12 years there, she is doing what she has always wanted to do.

"The veterans have done so much for us. I want to be able to give back to them," she said. She still gets excited by the smile on a veteran's face or surprised when a veteran breaks into song at a church service. As she says, "If your heart is not in it, then this is not for you." And it is obvious that Loretta Telley's heart is in it.

## JAY BLOOMER, CAMPBELL NURSING HOME ADMINISTRATOR

Jay Bloomer, the administrator at Campbell, is new to his job, having only been in South Carolina since January of 2011. But it didn't take him long to realize that Campbell was different from the other places where he has been the administrator over the last decade. According to Bloomer, "Campbell is unique because it has the added element of honor and pride of the military."

From his perspective, Campbell is a great program because of the wonderful community support, the success of the past administrators, and the dedi-

cation of its employees. He notes that there are employees who have been with the program since it opened in 1990.

There are more than 200 vets currently calling Campbell home, with roughly half having served in World War II and about a quarter having served in the Korean War. With this rich legacy of service, Bloomer is actively focused on the future as Campbell prepares to receive veterans from the more recent conflicts in Afghanistan and Iraq. He sees the need to adapt to the changing needs of veterans who are on the

horizon.

Originally from Tennessee, Bloomer's wife is from Anderson, SC, and he is glad to have the opportunity to move to her hometown.

In his role as administrator at Campbell, he feels the need to set the tone for the facility. As a family man, he knows no better way to do that than by bringing his own children to Campbell and letting them meet the residents. As he puts it, "show them what a real hero looks like."



Jay Bloomer,  
Nursing Home Administrator

"CAMPBELL IS  
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BECAUSE IT HAS  
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HONOR AND  
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MILITARY."

## PHILLIPA MCKAY, RN, DIRECTOR OF NURSING

The path from Manchester, Jamaica to Anderson, SC, was anything but straightforward for Phillipa McKay, the director of Nursing at Campbell, and you get the feeling she wouldn't want it any other way.

In her eight years at Campbell, McKay says she always has a "to-do" list for the next day by the time she is ready to go home. There is always something to throw her off course and she is continually adjusting her priorities. In fact, if she has an easy day, she goes

home worried that she didn't do something that she could have done.

Born in Jamaica, she was raised in England and had to make an early decision about her career path. She picked nursing and has never looked back. She has worked in both Canada and the United States, but especially enjoys the work at Campbell. "The men are so special that you need special people to take care of them. They don't ask for much, just to be cared for."

She provides that care, whether by giving a bath,

feeding, or administering medicine. McKay lives by the rule her mother, who had ten children, gave her: "treat everyone how you would like to be treated."

At the end of the day, McKay wants nothing more than to feel like she's "done something to make someone comfortable — that they are in the right place and that families can feel confident knowing their loved one is well cared for and respected." Oh, and don't forget that "to-do" list for tomorrow.



Phillipa McKay, RN,  
Director of Nursing



William E. Evans, Jr.,  
Director of Pharmacy Services

## WILLIAM E. EVANS, JR, DIRECTOR OF PHARMACY SERVICES

William "Bill" Evans is the director of Pharmacy Services at Campbell. After working in the private sector for over 20 years, he joined Campbell in 1998.

Evans is responsible for the 2,000 medicines that are dispensed on a daily basis, which works out to about ten medicines per resident. Compared to his work in retail pharmacy operations, he discovered many more regulations with lots of folks looking over his

shoulder. But he also gets to have more interaction with staff and a good working relationship with the medical director.

Evans was born in Tokyo, Japan, but was raised in Anderson. He received training at Erskine College, the Medical University of South Carolina in Charleston, the University of South Carolina in Columbia, and received his doctorate in Pharmacy from

the University of Florida in Gainesville.

He has worked in pharmacies across North and South Carolina but finds that his present job is "the most rewarding thing professionally that I've done." He explains that this job makes him feel good every day: "repaying them for the sacrifices that these ladies and gentlemen have made as they can no longer do for themselves is very special."



Macie G. Wright, LPN,  
CNA Instructor/Restorative  
Coordinator

## MACIE G. WRIGHT, LPN, CNA INSTRUCTOR/RESTORATIVE COORDINATOR

If every military unit has a drill sergeant, Campbell Nursing Home is no exception. Macie Wright's official title is the Certified Nursing Assistant (CNA) Instructor/Restorative Coordinator, but admits that drill sergeant might be more accurate. With the task of teaching the 50 CNA trainees who come through Campbell each year, she and her four staff make sure that treatments "are done like they are supposed to be." Wright can quickly reel off the 24 clinical skills a new CNA needs to know before moving on to his or her clinical practicum.

"When a new assistant can help those who can't do

anything for themselves to stand on their own, that's a good day," she says, with a smile that undermines her claim of being a harsh task-master.

Wright sees herself as the best advocate for the men and women in her care; in her words, "the responsibility for them falls on us."

Wright has been at Campbell since a month after the doors opened, and comes from a military family. Patriotism runs deep in Wright; she served in Army hospitals in Louisiana and Germany, her husband was a military man, and her son is currently in the Service. But she also has a personal connection to those needing nursing care. Her

mother has Alzheimer's, and she has seen the toll that "the disease that takes the mind but leaves the body" can take on the family.

An Anderson native, Wright graduated as an LPN in 1965, and since then she has worked to ensure that anyone she works with knows the values she holds high: "work for a living. Do the very best you can. Don't expect anyone to hand you anything." And she *definitely* plans on being at Campbell for the rest of her career. When she says those words, it isn't hard to see the drill sergeant behind the smile.

## GREG GAMBRELL, DMH PROGRAM COORDINATOR II

Greg Gambrell finished his academic training at Clemson, ready to work in Finance. He was prepared to go work "with the books," instead he found his calling working with people.

In his role as contract monitor, Gambrell is the link between DMH and Campbell. He is often the first person that families contact when trying to find placement for the veteran

in their family who needs nursing home care. He works with families and the Veterans' Administration office to help facilitate that move and steer through the process.

As contract monitor, Gambrell is responsible for being the extra set of eyes and ears on the care being provided at Campbell, making sure that everyone is on the same page taking care of veterans. He credits

his Christian faith with giving him the values he uses as a foundation for his work, the value of encouraging and helping each other. To him, what makes this job special is the people. He said, "It's a blessing to hear their stories, they are as much a blessing to me as I am to them. It's a privilege to be part of the Campbell team."



Greg Gambrell,  
DMH Program Coordinator II

## SAMMY LEWIS, SC VETERANS' AFFAIRS DIRECTOR, ANDERSON COUNTY

Sammy Lewis is a proud Marine. He lives by the motto "Semper Fi" (Latin for "Always Faithful") as much now as when he served in Vietnam. Returning home in 1970 after being wounded in action, he saw how Vietnam veterans were treated. For the last 17 years, he has worked in county Veterans' Affairs, making sure the treatment that veterans get now is better than what he saw when he came home.

His relationship with Campbell is part of that effort. Lewis visits the residents of Campbell frequently. He is quick to praise the staff and administration at Campbell for their efforts to provide care for the veterans who need

it. Lewis said, "I believe Jay Bloomer is doing a great job. He's caught on quickly; Campbell has great leadership," said Lewis.

To make things better, Lewis would love to see another 44-bed unit added to the facility. He is quick to suggest other ideas that would make life better for his fellow veterans. He wants educational credit for the training they received while in the service, added employment and housing opportunities for veterans, and educational opportunities for veteran's spouses and children.

Lewis often works with veterans to help them make claims and enroll in the VA process so they can get

medical coverage and/or into Campbell.

Raised by strong parents with a deeply religious upbringing, he easily identifies his values as "God, Corps, and Country." And true to his word "If the Lord grants me the days, Campbell is where I want to be." Semper Fi.



Sammy Lewis,  
SC Veterans' Affairs Director,  
Anderson County

### M. J. "Dolly" Cooper Veterans Cemetery

Located adjacent to Campbell, on property donated by DMH, is the first state owned and operated veterans' cemetery in the history of South Carolina, the M. J. "Dolly" Cooper Veterans Cemetery. The State of South Carolina partnered with the United States' Departments of Veterans' Affairs, and the federal government provided a grant of \$5.1 million to construct and initially equip the cemetery. With 59 acres, it is designed to be the final resting place for more than 16,000 veterans, their spouses and dependents.



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**RESIDENT SPOTLIGHT: JOHN B.**

John B. faced many obstacles before arriving at Richard Campbell Veterans' Nursing Home (Campbell). John was living at home alone when his children noticed something was happening to him. John said that he would sleep all the time and was always very weak. He knew something was wrong, but felt he had no control over what was going on. After many hospital visits, John was diagnosed with Parkinson's Disease, and knew that he would no longer be able to live alone.

John's wife of 56 years passed away in April of

2005. He has four very supportive children who have always been very active in his care. John says that his decision to live at Campbell was made when he found he could no longer walk or transfer himself due to his Parkinson's Disease.

John served in the Army under General Douglas MacArthur in the Philippines during WWII. When he found out he could come to Campbell to live because he was a veteran, he prayed that the Lord would open doors for him to be a beneficial part of this home because he did not want to sit

around depressed and bored.

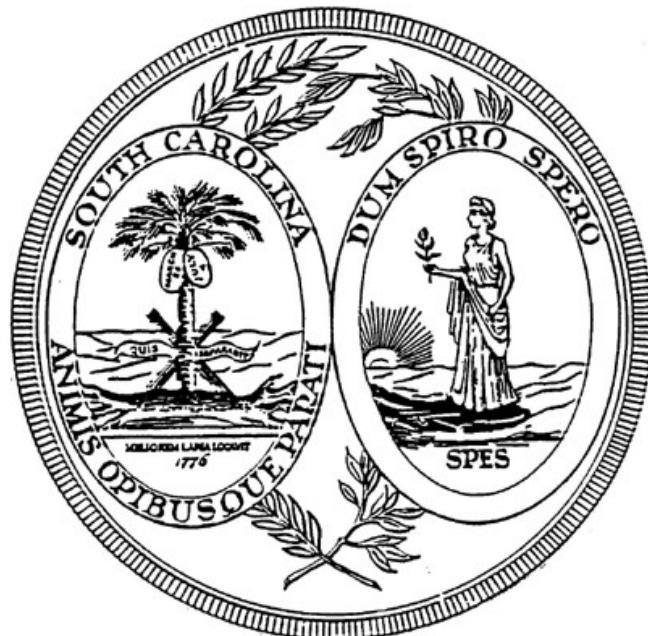
John loves people and wants to do things for others. He feels the Lord put him here for a reason and is very active in helping plan activities. John is the director/planner of the Campbell Choir, which does many events at Campbell and other facilities in the community. He has started a Midday Prayer Warrior Group and loves to ride his scooter throughout the facility visiting other veterans.

John says even though he would rather live at home, he feels very satisfied living at Campbell because

he is very busy, has made many friends, and gets to do things he likes to do. He loves the staff and says the best part of living at Campbell is the secure feeling of having all his needs met and not having to worry about being a burden.



John B.



**SOUTH CAROLINA DEPARTMENT OF MENTAL HEALTH  
STATE DIRECTOR JOHN H. MAGILL**

**VETERANS VICTORY HOUSE NURSING HOME  
ADMINISTRATOR LEEANNE NEWTON, NHA/CRCFA**

**Summer 2012**



**Veterans Victory House**  
**2461 Sidneys Road**  
**Walterboro, SC 29488**  
**843-538-3000**

## VETERANS VICTORY HOUSE NURSING HOME

Veterans Victory House (VVH), located in Walterboro, is DMH's newest facility for South Carolina veterans who need long-term nursing home care. Dedicated on Veterans Day 2006, the facility has five state-of-the-art pavilions, each named in honor of a South Carolinian who has made great personal sacrifice furthering the cause of freedom around the world.



*VVH blueprint*

VVH is available to veterans in need of long-term care who have received a general or honorable discharge from one of the five branches of US military service and have been current residents of South Carolina for at least a year.

The DMH facility is supported by funding from the State and the Veteran's Administration. DMH contracts with Health Management Resources Veterans Services, Inc. (HMR) to maintain and operate both VVH and the

Richard M. Campbell Veterans Nursing Home, which is located in Anderson. This partnership enables cost-effective services and a continuum of care to meet the needs of the residents. HMR provides quality care to the residents in a manner which recognizes and celebrates their special status as veterans.

According to Administrator LeeAnne Newton, who has been with VVH since its construction, the award-winning facility is the "Ritz-Carlton" of state veterans' homes.

VVH Medical Director Pete Carnohan, MD and his medical staff have extensive expertise in gerontological and rehabilitative services.

Amenities include large rooms, which allow for easy maneuverability, tall ceilings, and wide hallways. Residents also enjoy donated original art throughout the facility and beautiful grounds with a pond and fountain designed to take advantage of South Carolina's lush Lowcountry landscape.

Residents can participate in a variety of activities under the supervision of trained and certified activity therapists, a

small sampling of which includes annual Memorial Day and Veterans Day celebrations, which draw hundreds of attendees; an Honor Flight to Washington, D.C.; and visits from dignitaries, active service men and women, and Citadel students. In early 2012, the 60th anniversary of the Korean War was commemorated with a special recognition ceremony of VVH's Korean War veterans presented by SC native Lt. Col. Tim Washington.

The local community is actively involved in supporting the residents with assistance, donations, and volunteers. Examples include the Colleton County Veterans Affairs Office, the Walterboro Cruisers' annual car and truck show, the Combat Vets Associations and Ladson VFW's Christmas in May celebration, and H.I.S. Ministries' Horses in Service equine therapy program.

"We would not be here without them. You can't work without a volunteer base of support. We rely on them to make every day special for our vets," Newton said.

VVH is licensed by DHEC and is certified by the Centers for Medicare/Medicaid and the Veterans Administration.



60th anniversary  
Korean war ceremony

ACCORDING TO  
ADMINISTRATOR  
LEEANNE  
NEWTON, WHO  
HAS BEEN WITH  
VVH SINCE ITS  
CONSTRUCTION,  
THE  
AWARD-WINNING  
FACILITY IS THE  
"RITZ-CARLTON"  
OF STATE  
VETERANS'  
HOMES.



VVH residents enjoy visits  
with active duty servicemen.



Heyward Hilliard,  
Regional Vice President - HMR

“OUR FOCUS IS  
THE VETERANS  
AND THANKING  
THEM FOR  
THEIR SERVICE.”

NEWTON



LeeAnne Newton,  
NHA/CRCFA,  
Administrator

## HEYWARD HILLIARD, REGIONAL VICE PRESIDENT - HMR

Heyward Hilliard, regional vice president of HMR Veterans Services, Inc., believes that VVH has earned its great reputation for a variety of reasons. But primarily because of people – both at Victory House and in the community.

“VVH has good leadership in Ms. Newton and good partnerships with the State and local community. That helps us to provide resources to our vets. The staff is also good about getting our residents involved. If you’re here in the mornings, you’ll hear a long list of activities planned for the residents to encourage socialization and choice.”

Hilliard, a native of Lancas-

ter, began his career in long-term care during an internship at Erskine College, which then turned into a full-time job when he graduated. He has been an administrator with HMR for 10 years.

During visits to VVH, Hilliard makes a point to greet everyone he sees and listens attentively to both residents and staff. “I like to see staff anticipate and identify needs residents didn’t even know they had. For instance, the family of a veteran asked about the hats the veterans were wearing indicating the war they were in. They wanted to know where they got those. To us, it was an opportunity.” Eight days later, a hat arrived for the

new resident with his service information, hull number, and a picture of the ship he was on. “The family never asked for it, but if we can be in tune with opportunities like that, that makes our overall result better. You can identify those needs just by listening.”

Hilliard sees different needs on the horizon for future veterans VVH might serve. As more Korean War and Desert Storm veterans require long-term care, they will expect more technology and privacy in their living environment. Hilliard is preparing early. “We are always trying to find different ways to serve veterans better,” he said.

## LEEANNE NEWTON, NHA/CRCFA, ADMINISTRATOR

When LeeAnne Newton started her job as administrator in 2006, there wasn’t a resident in sight -- or even any walls or carpet. VVH was still under construction, and Newton and her team undertook the daunting task of transforming a dusty site into a welcoming home for South Carolina veterans.

After months of hard work, opening day was one of the most poignant times of Newton’s life. “Seeing those first residents and their families come in, everyone was so excited! What I love is that six years later you can still see that excitement when a resident comes in the door.”

Newton, a native of Savannah, Georgia, originally planned to be a teacher. While attending Georgia

Southern, she worked part-time as a mental health CNA, which led to her ultimate calling as a nursing home administrator. Her goal is to make each veteran served feel safe, respected, and loved

One special way Newton honors veterans is with the nationally-recognized Hail and Farewell ceremony she created. She felt that the practice of quietly handling death in a nursing home denied everyone the opportunity to celebrate the life of a resident and grieve the loss.

When a VVH resident is called home, staff, residents, volunteers, family members, and visitors line the main hall and are given small American flags. The family and caregivers walk with the casket as the staff and residents crowd the

front hall singing Amazing Grace and waving their flags. “Our Veterans deserve dignity and gratitude for their service to the country. The ‘Hail and Farewell’ is the final tribute of respect we can offer to our precious veterans,” Newton said.

VVH has a reputation as a premier veterans’ home. Newton credits her staff with making VVH such a huge success. “I’m proud as a peacock! There are so many people here who choose to work here because it gives them a sense of fulfillment.

We all share a simple philosophy: every day is Veterans Day. Our focus is the veterans and thanking them for their service,” Newton said.

## PETER S. CARNOHAN, MD, MEDICAL DIRECTOR

Peter S. Carnohan, M.D., believes the best career decision he made was accepting the medical director position at VVH, which he's held since it opened in 2006. "I enjoy working with this population. They are special members of our society; from day one, we thank them for their service," he said.

The average age of the veterans Carnohan serves is almost 85 years. He believes that this is a time the residents deserve TLC and a holistic approach. "I think that using all your senses to assess what's going on with a patient is sometimes lost in modern medicine. I try to treat the whole

person, not just symptoms," he said.

Carnohan is also seeing younger veterans with medical needs from the Gulf War and wars in Afghanistan and Iraq who need long-term care. "We're better at saving lives, so it's a different focus on them and their needs. They may be with us for decades, and we want them to have a high quality of life," he said.

The Rock Hill native and graduate of the Medical University of South Carolina comes from a line of physicians on his mother's side. "She planted the seed and encouraged me. I have her to

thank," he said.

He spends the majority of his time seeing the residents, providing check-ups, and attending to any medical issues they may have.

"The people living at Victory House are more than 'patients' or 'residents.' They are friends and heroes," he said. "The entire staff, from the resident care technicians to the director, is invested in their lives and it shows. We all work to provide our folks with the best possible care. It is an honor to meet and work with these veterans. They are truly deserving men and women."



Peter S. Carnohan, MD,  
Medical Director

"THE PEOPLE  
LIVING AT  
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ARE MORE THAN  
'PATIENTS' OR  
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THEY ARE  
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DR. CARNOHAN

## SHIRLEY A. ROBINSON, CDM, CFPP NUTRITIONAL SERVICES DIRECTOR

Orangeburg native Shirley Robinson has loved cooking since her ninth grade Home Economics class. So, after graduating from college, she began her career teaching culinary arts. For the last 21 years, she's brought that passion for cooking to food services, primarily in nursing homes. Robinson has brought it to VVH as the new director of Nutritional Services.

"This is a good fit for me. VVH is special because there is hands-on involvement from upper management, and it makes a big difference. Care starts from the top and trickles down," she said.

Robinson begins each day ensuring that the 23 Nutritional Services staff members

and the office are ready for the day, handling any problems early so that nutritious food can be prepared and served to the facility's 220 residents. "The residents always come first. I make sure the staff is okay so we can work to take care of the residents."

Nutritional Services works with a registered dietitian to meet the specific dietary needs of each resident, and special diets are made as prescribed by the attending physician. Three meals and three snacks are prepared on-site daily and served in the nursing units or in the Main Dining Hall. The Main Dining Hall offers a salad bar, buffet line, and lunch grill, giving

residents the option to choose whatever they like for their meals. Nourishment rooms throughout the facility are also open to residents 24/7. Because of its high quality standards, Nutritional Services has maintained an 'A' rating since it opened.

With so many different food needs, Robinson often calls upon her teaching background. "I like to teach proper methods and steps to make things easier so we can work smarter, not harder," she said.

Robinson values bringing sunshine and a smile to her work. "A happy person is a productive person," she said.



Shirley A. Robinson, CDM, CFPP  
Nutritional Services Director



Sandy Britt, RN,  
Staff Educator

## SANDY BRITT, RN, STAFF EDUCATOR

VVH Staff Educator Sandy Britt, RN, didn't originally plan to become a nurse. But after the DuPont factory where she worked in her native Pennsylvania closed, Britt obtained a nursing degree. "Nursing chose me, I didn't choose it," she said. "It was a gift from God."

Family brought Britt from the mountains of Pennsylvania to the South Carolina Lowcountry. Her husband's mother lived here, her son, a Chief in the Navy, was stationed in Charleston at the time, and her daughter had moved here. "I had to come down, too!"

Britt started with VVH as a unit manager and has served as Staff Educator since August 2011. "I never envisioned working in a nursing home, but I still get chills when I walk through the door. It's a family here," she said.

As part of her duties, she manages the popular Stars and Stripes CNA Training Program, which teaches students to become Certified Nursing Assistants (CNA).

Out of 300 applications to the latest class, only 16 were accepted. "You can't teach compassion. They have to

have it when they come here," Britt said.

Stars and Stripes graduated its 22nd class in December 2011, and the lowest GPA was a 94.1. Students who successfully complete the five-week program can receive their education free if they work at the facility for a year, benefiting both the community and VVH. "I enjoy sharing knowledge. I present knowledge to them and they soak it up," Britt said.

Compassion and caring are the core values Britt brings to her work.



Niki Hunter,  
CNA and Restorative Aide

## NIKI HUNTER, CNA AND RESTORATIVE AIDE

For CNA and Restorative Aide Niki Hunter, there is never a dull moment working with the veterans on the Lyons unit. "I love to hear their stories and how their days are going, getting their perspectives, and meeting their families," she said.

In addition to her nursing duties, Hunter assists resi-

dents with their physical therapy to help them move and stay active.

Hunter successfully graduated from the VVH Stars and Stripes CNA Training Program a year ago, and has been with the facility ever since. Her ultimate goal is to become a nursing home administrator.

"I love it here, this is the best job I've ever had!" she said.

Hunter treats the residents of Lyons as if they were her own family. "I like to look out for others, I try to treat the residents as I want to be treated when I'm elderly. I hope someone will care for me the way I care for them now," she said.



Donna Hiers, CNA

## DONNA HIERS, CNA

When 22-year-old Donna Hiers was fresh out of Walterboro's Thunderbolt Career and Technology Center, she signed up for the VVH Stars and Stripes CNA Training Program. "I always wanted to be a nurse," she said, and helping care for her sick grandfather solidified her

choice of careers.

After she graduated from the program two years ago, Hiers began working full time at VVH on the Currey unit for residents with Alzheimer's. It takes a special person to work with Alzheimer's residents, and Hiers has the right combination of compassion, kind-

ness and patience to ensure their well-being. While each day is hectic, Hiers sees her work as fun.

The married mother of two toddlers doesn't plan to ever leave VVH. "I love coming here! VVH is special because we are here for the residents. We care how they feel."

## VERA JENKINS, RESIDENTIAL CARE TECHNICIAN

Vera Jenkins was the very first staff member hired to work at VVH. Six years later, she still looks forward to coming to work and seeing the cheery faces of the residents on the dementia floor. "Every day is exciting, and every day is a different day," she said.

The youngest of 15 brothers and sisters, Jenkins is originally from Florence. Her family moved to Washington, D.C., when she was a child, but while visiting her grandmother in Florence, Jenkins loved it and decided to stay. She's active in the community and church with her two sons and brings that dedication to her work with VVH's vets.

"These guys, they paved the way for us. You have to treat them with respect."

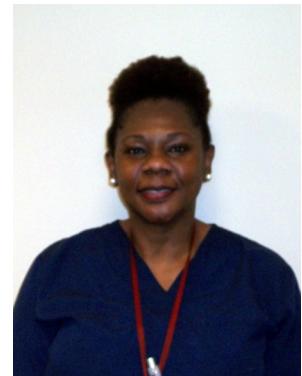
Jenkins understands that moving into a new residence can be difficult for the veterans. They don't know anyone yet and were used to being in their previous environments. And to some, moving into a nursing home "is like being in another war," Jenkins said.

"What you have to do is put yourself in their shoes. You have to feel what they are feeling. You have to be loving and understanding so they'll get comfortable. It takes a while, but before you know it, they get to know you and

trust you."

Jenkins works hard to ensure the residents are treated with the utmost care and dignity. "I want my residents to represent me. We have to go the whole nine yards. I like my hair done, my teeth brushed, and my clothes clean. They do, too." And to make sure of it, Jenkins often goes out and buys what is needed on her own because that's what she wants to do.

She believes that what makes VVH special is the caring. "You can see it. We are a family and we do what families do."



Vera Jenkins,  
Residential Care Technician

## JAMES A. WHITE, DIRECTOR COLLETON COUNTY VETERANS AFFAIRS OFFICE

VVH has close working relationships with many businesses and organizations in the community, especially Veterans' Affairs.

Colleton County Veterans Affairs Office Director James White believes that VVH is the greatest venture Colleton County has ever seen. "I think a lot of people are seeing that. It's a beautiful spot, a beautiful facility and it's good for the community," he said.

White's primary duty is to assist veterans and their dependents with determining eligibility for and obtaining federal and state benefits administered by the Department of Veterans Affairs.

He makes it a point to "come

out and see the vets" at VVH each week. "I have an open door policy to everyone — loved ones as well as staff," White said. "The Victory House staff is great about working with me and referring folks who need assistance with their benefits."

When it comes to helping veterans, White does whatever he can. "I don't favor one over another. If you served, then you deserve benefits."

In his efforts to help residents, he has obtained special geri-chairs for residents and even helped one "young man" obtain dentures, performing necessary research and personally hand-carried the com-

pleted paperwork to Charleston.

Born in Cottageville, White served over 20 years in the Army and has been the Colleton County Veterans Affairs Office director for the last 18 years. White is one of the key people instrumental in bringing VVH to Colleton County, benefiting not only the state's veterans, but the local people and economy, as well.

White knows that more facilities like VVH are needed. "Georgia, Florida, and North Carolina have more veterans' homes than South Carolina. South Carolina needs another one to keep up with demand," he said.



James A. White, Director  
Colleton County  
Veterans Affairs Office



TO SUPPORT THE RECOVERY OF  
PEOPLE WITH MENTAL ILLNESSES.

**SC DEPARTMENT OF  
MENTAL HEALTH**

2414 Bull Street  
Columbia, South Carolina 29201

Phone: (803) 898 - 8581

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**VVH  
PAVILION  
NAMESAKES:**

Boatswain's Mate First Class James Elliot Williams – Medal of Honor recipient, U.S. Navy, Vietnam

Lance Corporal Rodney J. Williams – U.S. Marine Corps, Beirut

Captain John H. Truluck – U.S. Air Force, World War II, Ace

Staff Sergeant Eugene A. Lyons – U.S. Army, World War II

Master Sergeant Francis S. Currey – Medal of Honor recipient, U.S. Army, World War II



When Bernard Warshaw saw the need for an additional nursing home to serve our veterans, he became very involved with what is now known as the Veterans Victory House Nursing Home (VVH). From the early planning stages to the land clearing to working with architects and contractors on the design of the building, he's been a vital asset.

The VVH facility was designed with five pavilions,

**VETERANS VICTORY HOUSE  
NURSING HOME**

2461 Sidneys Road  
Walterboro, SC 29488

843-538-3000

**MR. BERNARD WARSHAW**

each of which Warshaw helped name in honor of a military leader with ties to the local community.

At the Grand Opening in 2006, Warshaw gladly greeted over 1,500 guests who were eager to see the campus.

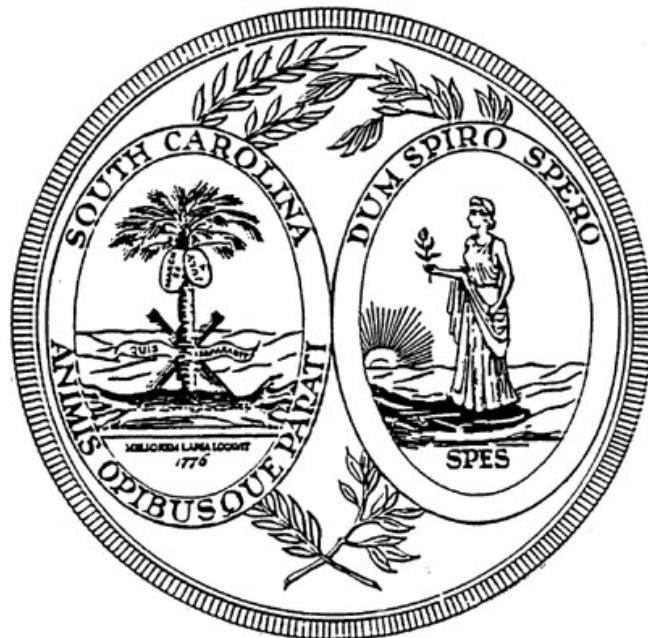
A true champion for both veterans and those with mental illness, Warshaw served over 20 years on the South Carolina Mental Health Commission and remains commissioner emeritus.

Warshaw's life philosophy is to "help our city, state, and country to be a better place to live." He attends functions of the VVH and visits often. He has served as an amazing supporter and is a true friend of Veterans Victory House.

**Biography:**

Warshaw earned his undergraduate degree from The Citadel in 1942. He joined the US Army and served three-and-a-half years, mostly overseas. After his discharge, he returned home to Warshaw's of Walterboro, a fine clothing store opened by his parents in 1920. He operated this business until he retired on his 80th birthday.

Warshaw received an honorary doctorate of business administration and humanities from The Citadel in 2001. The Colleton County Health and Human Services Office is named the Bernard Warshaw Building in his honor.



**SOUTH CAROLINA DEPARTMENT OF MENTAL HEALTH  
STATE DIRECTOR JOHN H. MAGILL**

**WILLIAM S. HALL PSYCHIATRIC INSTITUTE  
DIRECTOR ANGELA FORAND, PH.D.**

**Spring 2012**



William S. Hall Psychiatric Institute  
1800 Colonial Drive  
Columbia, SC 29203  
Phone: (803) 898-1662

## WILLIAM S. HALL PSYCHIATRIC INSTITUTE

William S. Hall Psychiatric Institute (Hall Institute) opened its doors in 1964, as a result of the dedicated efforts of William S. Hall, M.D., DMH's first state commissioner of Mental Health.

Legislation in 1965 amended the SC Code of Laws to make a special provision for Hall Institute to be maintained as a teaching hospital for the primary purposes of training mental health personnel and conducting psychiatric research. The Institute has trained more than 250 psychiatry and 180 psychology interns since it opened.

Today, Hall Institute collaborates with the Department of Neuropsychiatry and Behavioral Science of the University of South Carolina (USC) School of Medicine, and Palmetto Richland to provide training for students in neuropsychiatry and behavioral science. Dr. Angela Forand, Hall's director, serves on the USC School of Medicine's faculty.

Hall Institute's focus is on the unique needs of children and adolescents with mental illness and substance abuse disorders, providing both inpatient and outpatient treatment

and services to some of the state's most severely mentally ill children, adolescents, and their families. In Fiscal Year 2011, Hall Institute provided more than 15,000 bed days for 515 children.

Programs at Hall Institute include Children's Acute Care for children ages 4 to 12, Adolescent Acute Care for children ages 13 to 17, and a Substance Abuse unit for adolescents with both substance abuse disorders and mental illness. These programs offer inpatient stabilization and treatment modalities which include individual therapy, group therapy, psychopharmacology, activity therapy and educational services.

Hall operates a residential treatment unit for males, aged 13 to 21. Many of the male residents have involvement with the Department of Juvenile Justice and have difficulty controlling their aggressive behaviors. One focus of the program is to teach the adolescents coping skills.

Hall Psychiatric Institute is accredited by The Joint Commission (TJC), Hospital Accreditation Program, and has been since 1968.

### The ARC

Hall Institute's Assessment Resource Center (ARC) is a child-focused program, which, through service, multidisciplinary coordination, teaching, and research ensures that children suspected of being maltreated receive the highest level of professional care. The ARC serves more than 600 children annually and is the "go-to" center of the Midlands for the evaluation of children who are victims of physical and sexual abuse.

Outpatient services provided by the ARC include physical exams for suspected child maltreatment, child forensic interviews, mental health evaluations, psychotherapy for children and their caregivers, multidisciplinary case coordination, professional education, and case consultation. ARC also provides ChildFirst training for the Children's Law Center in forensics interviewing techniques for law enforcement professionals.

The ARC is accredited by the National Children's Alliance as a Children's Advocacy Center.

HALL  
INSTITUTE'S  
FOCUS IS ON  
MEETING THE  
UNIQUE NEEDS  
OF CHILDREN  
AND  
ADOLESCENTS  
WITH MENTAL  
ILLNESS AND  
SUBSTANCE  
ABUSE  
DISORDERS.



## ANGELA FORAND, PH.D.—DIRECTOR



Angela Forand  
Director

WHAT MAKES  
HALL INSTITUTE  
UNIQUE IS THAT  
IT IS THE ONLY  
STATE-  
SUPPORTED  
CHILD AND  
ADOLESCENT  
INPATIENT  
FACILITY IN  
SOUTH  
CAROLINA.

Angela Forand, Ph.D., has been director at Hall Institute for five years, having previously served as director of Residential Treatment Services, where she started South Carolina's first state supported children's residential treatment program. She has worked at Hall Institute for 24 years.

Born and raised in Savannah, Georgia, Dr. Forand earned her bachelor's, master's, and doctorate degrees in Psychology from the University of Georgia, where she also completed post-doctoral training in Child and Adolescent Psychiatry.

To Dr. Forand, what makes Hall Institute unique is that it is the only state-supported child and adolescent inpatient facility in South Carolina, with four fairly diverse inpatient programs and the ARC (outpatient). Inpatient programs comprise inpatient acute care for children and adolescents, residential treatment units, and the only state supported dual-diagnosis

treatment program for adolescents, which also accepts emergency admissions.

Throughout her tenure at Hall Institute, Dr. Forand has seen the daily census at the facility decrease, but notes that the demand for its unique services remains. In fact, Hall Institute still runs a waiting list at times, particularly during the school year, and especially for its Adolescent Acute unit. "We are in high demand from the community," Dr. Forand explained. "I see a distillation of the population to a much more psychiatrically impaired population. In the earlier years, we saw more conduct disordered patients. The community also does a much better job with referrals. I don't see the demand decreasing."

Dr. Forand's goals include continuing to provide training for staff in child development, pathology, and appropriate interventions, as the facility admits many patients that many hospitals refuse. "It's important that we provide

tools to staff for dealing with a difficult population," she said.

In the long run, Dr. Forand would like for Hall Institute to be "the facility of choice, not the facility of default because someone doesn't have insurance." When it comes to quality, she would put Hall Institute up against any public or private treatment facility: "I absolutely would," she said, "and I think we'd come out as number one. The treatment and staff here are state-of-the-art."

As director of Hall Institute, Dr. Forand invokes her personal and professional philosophy: "One of my views of life, or the way we *should* behave is 'others first.' So I want to support my staff, to provide whatever they need to get their jobs done, because they have the most difficult jobs — they're the front line. That translates to the children. With the staff, it is *children* first, and they are the priority. They're the ones we're here for."

## ANITA RICE—LEAD TEACHER, HALL INSTITUTE SCHOOL



Anita Rice  
Lead Teacher  
Hall Institute School

Anita Rice has served as lead teacher at the Hall Institute School for six years. In addition to a bachelor's degree in Government and International Studies, an MAT in Secondary Social Studies, and master's in Special Education, all from the University of South Carolina, she has 22 years of experience in education, teaching emotionally disabled and learning disabled students for the majority of her career.

As lead teacher, Rice is responsible for day to day operations of the school. Teaching multiple education levels at one time can be challenging, but she explains, "Some kids perform better due to the class size and structured environment, than they would in a traditional school. I love what I do, and I enjoy my job. We've got a great group of kids right now." Rice reports

that she sees many students at Hall Institute turn their lives around and make drastic improvements.

Rice is guided, in part, by values imparted to her growing up. "I believe in being fair. I am the second of five children," she said. "As such, I learned to do what needs to be done for the child who needs it, when he or she needs it."

## PHYLLIS BRYANT-MOBLEY—MEDICAL DIRECTOR

Phyllis Bryant-Mobley, M.D., received her undergraduate degree in Engineering and Humanities from the Massachusetts Institute of Technology, and matriculated from the University of South Carolina School of Medicine (USC-SOM), completing her residency in Adult Psychiatry and a Fellowship in Child and Adolescent Psychiatry at the USC-SOM Department of Neuropsychiatry and Behavioral Science. She has been medical director at Hall for two years.

Dr. Bryant-Mobley had worked in Engineering for seven years when she decided to pursue medical school, as she initially intended growing up. Interestingly, she never planned to be a psychiatrist. “I found my psychiatry rotations to be interesting, and interesting all the time. It was never

routine,” she said. After her Psychiatry rotation, she knew what she wanted to do.

She trained at DMH and completed her General Psychiatry and Child Training at Hall Institute. “The clinicians who were here when I began and the research that was going on made my training an exciting experience.”

Being medical director is very different from clinical work and requires she navigate the differences between administrative and clinical areas. She supports the medical staff, with everything from budgetary problems and staffing issues to admittances and releases. “A lot of what I do involves being a bit of a cheerleader, supporting the staff and going to bat for them,” she explained. “We have very good doctors, very good licensed prescribing practition-

ers who work with a difficult population.”

Dr. Bryant-Mobley is proud of Hall Institute. “I feel the quality of our care is excellent, because we ask the right questions up front, and we don’t take more than we can handle. We have excellent child psychiatrists and nurse practitioners. No micromanagement is necessary. I have a very dedicated group,” she said.

Her wish list for the future of Hall Institute includes a return to performing research, testing, and comprehensive workups, and operating developmental clinics. And she plans to be there, explaining, “In the future, I want to be doing what I’m doing now. I enjoy it. I enjoy the people I work with, the people I supervise, all the people at Hall Institute. We’re a family.”



Dr. Phyllis Bryant-Mobley,  
Medical Director

“THE QUALITY OF OUR CARE IS EXCELLENT, BECAUSE WE ASK THE RIGHT QUESTIONS UP FRONT, AND WE DON’T TAKE MORE THAN WE CAN HANDLE.”

DR. BRYANT-MOBLEY

## ALICE ANN FARLEY—SPEECH THERAPIST

Alice Ann Farley, a licensed speech language pathologist and fluency specialist in Columbia, has served as a consultant for DMH since the mid 1980's, previously at the SC State Hospital, Crafts-Farrow State Hospital, and now at Hall Institute. She earned her undergraduate and graduate degrees from the University of Georgia.

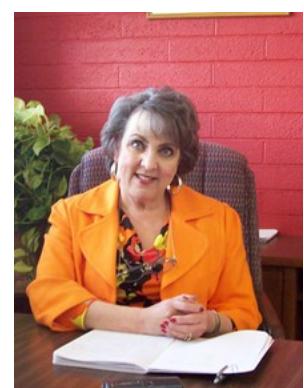
Originally from Southern Pines, North Carolina, Farley originally planned to major in Music, but had a severe stuttering problem. She needed speech assistance, which she received at the University of

Georgia; she knows what it's like to be in the trenches. The result has been a lifelong dedication to people who stutter and to providing quality and individualized intervention to people of all ages.

Farley's day-to-day work as a speech therapist involves working with communication disorders, screening, evaluating, recommending evaluations, and providing staff education. When she receives a call from one of the wards at Hall Institute, she comes to the facility as soon as possible to provide services. She believes that “positive reinforce-

ment is very helpful to overall staff-to-child communication. We must be very cognizant of and sensitive to these situations.”

Overcoming her own problem led to her career; her life experiences help her identify and empathize with the many different situations that her clients have. “I love what I do and I want to model to others compassionate care,” she said. “You might be the one person who says something encouraging to someone in need; you never know when such an interaction will have a profound effect.”



Alice Ann Farley  
Speech Therapist

## WANDA SIMPSON—MENTAL HEALTH SPECIALIST



Wanda Simpson  
Mental Health Specialist

“THE FIELD OF  
MENTAL  
HEALTH HAS  
CHANGED  
DRASTICALLY...  
NOW WE  
WORK TO  
RETURN  
KIDS TO THE  
COMMUNITY.”

SIMPSON

Columbia native Wanda Simpson is a certified nursing and medical technician, and has worked at DMH for 30 years. She previously worked with geriatric patients at Crafts-Farrow State Hospital for 11 years and enjoyed it, but realized she wanted to work with kids and has been at Hall Institute ever since.

“I love working with children,” she said. “I like seeing change and growth. You can see it with the children. It’s great when they go back into the community and they’ve made it and they’re functioning. It makes me happy to see children get better.”

Simpson always wanted a big family, explaining, “I got one. I have four children of my

own, but I feel like these kids I care for are my kids, too.”

She knew she wanted to work in nursing from a young age. “I was the oldest, always taking care of somebody, so I knew I would do something along the lines of taking care of people. I enjoy doing that, I enjoy helping people,” she said.

“We have a wonderful group of people that work with the children, a great nurse manager, and a great director who stresses learning and professional growth. The field of Mental Health has changed drastically from when I started and now we work to return the kids to the community. That works for me, because I love to see growth

and change. That’s a focus here.”

A typical day for Simpson includes staff checks, new admissions (ensuring orientations are done, and if not, completing them), and making sure that children who have just been admitted understand the program. “The children may be scared and unsure when they come in,” she said. “It’s only fair that they know the process, what we have to offer them, and what’s expected of them.”

When asked about her personal and professional values, she simply answers “Respect. If you expect to get respect, you have to give it, no matter how old you are.”

## KATHY JENKINS—DIRECTOR OF NURSING

Hall Institute’s Director of Nursing Kathy Jenkins has served in her position for six years, and has been with DMH for 20 years. The Holly Hill native obtained her bachelor’s degree in Nursing from the University of South Carolina, and a master’s in Business Administration in Healthcare Management from Colorado Technical University.

Jenkins knew she wanted to be a nurse from a very young age, wanting to help, assist, and support others. Her desire to help people and watch them progress makes her job at Hall Institute a perfect fit.

“Seeing our patients come in, as ill as they are, getting well, seeing someone become less fearful, helping to get that person better, that is the joy of what I have achieved in my field as a psychiatric nurse. It is very rewarding for me,” she said.

Her day to day duties are varied; the only constant is that what she has planned is not what happens. She begins each day by assessing what is going on at the unit level, with regard to employees and patient care. Whenever new patients who are very ill or very challenging arrive, she is there to support the staff. “We’re all

in this together,” she explained. “The beauty of the staff here is that we work together to do what we need to do to meet the needs of the patients. If we have done this and the staff feel supported, my day has been a success.”

When it comes to her career, Jenkins is proudest of “being able to serve children, who are so important to the state of South Carolina. I’m proud of the people I work with, and how we are all about the needs of the children. What I’ve found here is that I learn every day, from everyone on the team, how to best take care of the children.”



Kathy Jenkins  
Director of Nursing

## CHARLES VILORD—PROGRAM DIRECTOR, ADOLESCENT RECOVERY PROGRAM

Charles Vilord earned his bachelor's and master's degrees in Social Work from Florida State University. He worked in Florida for 16 years, designing effective program and treatment models in the area of Crisis Stabilization, single-point access models, public/private partnerships, juvenile justice reform, and deinstitutionalization and client empowerment.

As a medic in the military, Vilord saw a good deal of substance abuse and performed counseling duties. Following his military service, Vilord worked as a psychiatric technician at a local psychiatric hospital and realized his aptitude for the profession.

Vilord came to Hall Institute in 2000, as program director of the Adolescent Recovery Pro-

gram, which specializes in the treatment of co-occurring addiction and mental health disorders in adolescents between the ages of 13 and 17. In his view, Hall Institute is unique because its value to various community stakeholders is evident; the referral rate indicates satisfaction. "For example, family courts and the Department of Juvenile Justice see us as a treatment option for kids with substance abuse problems who can't be placed anywhere else, a suitable place for treatment resistant kids," he explained. "We are unique because we are able to provide treatment whether the patients like it or not and we have the skill set to do that."

To the probate courts, Hall Institute is seen as a safe place;

procedures put in place have been able to unblock local emergency rooms' ability to get kids into the program, decreasing emergency admissions. "The probate court is thankful for that," said Vilord. "And they're thankful that we don't discharge kids when they are difficult. Our premise is 'You don't have to be voluntary to get better'."

Treatment in the Adolescent Recovery program is crafted in a way that doesn't depend on patients' volunteering, but that elicits their volunteering, using motivational techniques. "Referral agencies are very motivated to get kids to us, and we're very motivated to take them, because that's what we do," said Vilord. "We don't give up on kids."



Charles Vilord  
Program Director  
Adolescent Recovery Program

**"WE DON'T  
GIVE UP ON  
KIDS."**  
**VILORD**

## ALICIA BENEDETTO, PH.D.—CHIEF PSYCHOLOGIST, ASSESSMENT RESOURCE CENTER

Licensed Clinical Psychologist and Forensic Interviewer/Evaluator Alicia Benedetto, Ph.D., has worked at the ARC for 5 years. She provides therapy, court preparation, expert witness testimony, and consultation, as well as training services to child protection professionals.

A native of Cleveland, Ohio, Dr. Benedetto completed her undergraduate education at New York University, and received her doctorate degree in Psychology from St. John's University. She completed an accredited internship at Hall Institute, after which she served as the facility's coordi-

nator of Treatment Services for Children and Adolescents. She then transferred to the ARC.

Dr. Benedetto explains what makes the ARC unique: "it comprises a team of highly trained professionals; there are Child Advocacy Centers (CACs) across the country, but the ARC is a fully accredited CAC, which requires meeting very stringent requirements of the National Children's Alliance," she said. "The ARC also trains child protection professionals through the Child First program, a week-long course that is provided three to four times per year." Advanced training for professionals who

have taken part in the week-long course is also provided. "The ARC is a feather in the cap of South Carolina," she said. "One of the things we can truly be proud of, one of the areas we are far ahead in is the area of child abuse treatment."

When she looks to the future, Dr. Benedetto intends to continue to be a part of the ARC Team: "I can't imagine doing anything besides child protection work; it's extremely important and fulfilling. I feel on a daily basis the difference we make in children's and families lives," she said.



Alicia Benedetto, Ph.D.  
Chief Psychologist  
Assessment Resource Center



TO SUPPORT THE RECOVERY OF  
PEOPLE WITH MENTAL ILLNESSES.

**SC DEPARTMENT OF  
MENTAL HEALTH**

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**RECOVERY SPOTLIGHT  
BY—"SPIKE" – AGE 16**

I cut myself multiple times and that's what led me to this place. In my treatment plan I have participated in a lot of groups, such as individual therapy and art groups, process group, 5 step recovery group, and social skills group. Those groups help me with controlling my anger and with good social skills, and help me get ready to face society when I leave this place.

The staff treat you with the same respect you treat them. They take great care of you. They also come to you and let you know that they're here for you.

Now that I have received my treatment there are things I know I can use to replace cutting, like walking away from bad situations, talking to someone when I feel angry instead of holding it in, writing, or listening to music.



## Committee Mission

Determine if agency laws and programs are being implemented and carried out in accordance with the intent of the General Assembly and whether they should be continued, curtailed or eliminated. Inform the public about state agencies.

Website: [http://www.scstatehouse.gov/CommitteeInfo/  
HouseLegislativeOversightCommittee.php](http://www.scstatehouse.gov/CommitteeInfo/HouseLegislativeOversightCommittee.php)

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